GIG CYMRU NHS WALES | Bwrdd Iechyd Prifysgol Hywel Dda University Health Board

Cyfarfod Cyhoeddus y Bwrdd/ Public Board Meeting

DYDDIAD Y CYFARFOD: **DATE OF MEETING:**	30 July 2026
TEITL YR ADRODDIAD: **TITLE OF REPORT:**	Joint Committees and Collaboratives Update Report
CYFARWYDDWR ARWEINIOL: **LEAD DIRECTOR:**	Professor Phil Kloer, Chief Executive
SWYDDOG ADRODD: **REPORTING OFFICER:**	Clare Pearce, Committee Services Officer

Pwrpas yr Adroddiad (dewiswch fel yn addas) **Purpose of the Report** (select as appropriate)
Ar Gyfer Trafodaeth/For Discussion

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The purpose of this report is to provide an update to the Board in respect of recent Joint Committee and Collaborative meetings to include the following:

- NHS Wales Joint Commissioning Committee (JCC)
- NHS Wales Shared Services Partnership Committee (NWSSPC)
- Mid Wales Joint Committee for Health and Care (MWJC)

Cefndir / Background

The Hywel Dda University Health Board (HDdUHB) has approved Standing Orders in line with Welsh Government guidance, in relation to the establishment of the JCC and NWSSPC. In line with its Standing Orders, these have been established as Joint Committees of HDdUHB, the activities of which require reporting to the Board.

The confirmed and unconfirmed minutes, agendas and additional reports from JCC and NWSSPC meetings are available from each Committee's websites via the following links:

NHS Wales Joint Commissioning Committee Website
NHS Wales Shared Services Partnership Website

The MWJC was established in March 2015 following a study of healthcare in Mid Wales commissioned by Welsh Government and undertaken by the Welsh Institute for Health and Social Care (WIHSC) (*ref: Mid Wales Healthcare Study, Report for Welsh Government, WIHSC – University of South Wales, September 2014*). In March 2018, the Mid Wales Healthcare Collaborative transitioned to the Mid Wales Joint Committee for Health and Care whose role will have a strengthened approach to planning and delivery of health and care services across Mid Wales and will support organisations in embedding collaborative working within their planning and implementation arrangements.

Asesiad / Assessment The following Joint Committee and Collaborative updates are attached for the Board's consideration: **Joint Commissioning Committee (JCC)** • Highlight report from the JCC meeting held on 26 May 2026 **NHS Wales Shared Services Partnership Committee (NWSSPC)** • Summary of key matters considered by NWSSPC, and any related decisions made at its meetings held on 14 May and 25 June 2026 **Mid Wales Joint Committee for Health and Care (MWJC)** • The MWJC will next report to the September 2026 Board meeting.
Argymhelliad / Recommendation The Board is asked to **RECEIVE** the updates in respect of recent Joint Commissioning Committee (JCC), NHS Wales Shared Services Partnership Committee (NWSSPC) and Mid Wales Joint Committee for Health and Care (MWJC) meetings.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix, Teitl a Sgôr Risg Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Nodau Cynllunio 2026/27 Planning Goals 2026/27	All Planning Goals Apply

Hypergyswllt i Amcanion Llesiant HDdUHB 2026 Hyperlink to HDdUHB Well-being Objectives 2026	6. Work with partners and communities to nurture and support everyone to achieve their best well-being
Model Cymdeithasol ar gyfer Iechyd a Llesiant: (wedi'i gwblhau ar gyfer newid strategol a/neu newidiadau sylweddol i wasanaethau) A Social Model for Health and Wellbeing: (*complete for strategic change and/or significant service changes)*	4. Collaborations with partners will be strengthened and developed to make the most of the building blocks of health and wellbeing, with the goal of enabling individuals and communities to build resilience and improve health equity
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Link to JCC Website Link to NWSSP Website Link to MWJC Website
Rhestr Termau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y cyfarfod hwn: Parties / Committees consulted prior to this meeting:	Joint Commissioning Committee NHS Wales Shared Services Partnership Committee Mid Wales Joint Committee for Health and Care

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Explicit within the individual Joint Committee and Collaborative reports where appropriate.
Ansawdd / Gofal Claf: Quality / Patient Care:	Not Applicable
Gweithlu: Workforce:	Not Applicable
Tegwch Iechyd: Health Equity:	Not Applicable
Risg: Risk:	The Board has approved Standing Orders in relation to the establishment of the JCC and NWSSP Joint Committees, and Terms of Reference for the MWJC.

Cyfreithiol: **Legal:**	In line with its Standing Orders, the Health Board has established JCC and NWSSP Joint Committees, the activities of which require reporting to the Board.
Enw Da: **Reputational:**	Not Applicable
Gyfrinachedd: **Privacy:**	Not Applicable
Cydraddoldeb: **Equality:**	Not Applicable

GIG CYMRU NHS WALES | Cyd-bwyllgor Comisiynu Joint Commissioning Committee

Joint Commissioning Committee

Highlight Report from the Joint Commissioning Committee

Dyddiad y Cyfarfod / Date of Meeting	26/05/2026
Statws Cyhoeddi / Publication Status	Open/ Public
	Not Applicable
Awdur yr Adroddiad / Report Author	Gareth Mitchell, Corporate Governance Manager, NWJCC
Cyflwynydd yr Adroddiad / Report Presenter	Juliet Brown, Chief Commissioner, NWJCC
Noddwr yr Adroddiad / Report Sponsor	Juliet Brown, Chief Commissioner, NWJCC

Pwrpas yr Adroddiad / Report Purpose	For Noting

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	**Date**	**Outcome**
		Choose an item.

1. SITUATION/BACKGROUND

This report had been prepared to provide Health Board (HB) Chief Executive Officer Members of the Joint Commissioning Committee (JC) with a summary of the key issues considered at its public meeting on 26 May 2026.

Key highlights from the meeting are reported in Section 2.

2. HIGHLIGHT REPORT

(Links to reports highlighted **May 2026 - NHS Wales Joint Commissioning Committee**).

Status	Update
Alert / Escalate	• The **[Chair's Report]** noted the need to undertake a Chair's Action on 30 March 2026 following discussions at the Extraordinary Meeting of the JC held on 23 March 2026. Following the meeting, a majority of JC Members approved the following wording to approve the NWJCC Annual Plan (2026-27): The NHS Wales Joint Commissioning Committee resolved to: *APPROVE the 2026/27 plan subject to the requirement for the JCC to work collaboratively with Local Health Boards to urgently develop the 2026/27 priorities to maximise cost improvement efficiencies and savings to improve the additional financial requirement of £16.2m in year* This was reported at May's JC for consideration and ratification. • It was reported that there was currently only one Health Board (HB) CEO member of the Quality, Safety and Outcomes Sub-Committee with the need for another to ensure continuity of attendance at each meeting.
Advise	The **[Chief Commissioner's Report]** incorporated Director of Commissioning Reports to highlight performance and quality issues that had arisen since updates shared at Sub-Committee meetings in April 2026. These updates included: ○ **Women and Children's Services** Neonatal assurance meetings continue across providers, with the next cycle of engagement underway. These provide ongoing oversight of staffing, quality and safety, alongside supporting continued improvement following recent independent reviews. Workforce constraints within paediatric radiology at Cardiff and Vale University Health Board present a risk to sustaining a 24/7 service, with mitigation arrangements in place including locum cover and remote specialist support where required. Paediatric neurology services continue to experience capacity challenges, including reduced provision at Alder Hey Hospital and workforce changes within Wales, impacting access and equity of specialised services for patients. Mitigation actions were being progressed in partnership with health boards. ○ **Ambulance Patient Handover** Ambulance handover performance remains a significant area of system pressure. While improvement was demonstrated following renewed national focus on the 45-minute standard, performance remains variable across Wales with a total of 16,468 lost hours in March 2026. Whilst there has been some improvement, handover delays remain significantly above levels of commissioned activity. The root cause is predominantly system driven, linked to emergency department/hospital capacity, patient flow and discharge delays across HBs. Phase 2 of the Ambulance Performance Framework

Status	Update
	has further evidenced the direct correlation between hospital handover delays and lower ambulance response times in the community, indicating that this issue cannot be resolved by the provider or commissioner alone. ○ **Review of Adult Gender Incongruence Services** The NWJCC is undertaking a comprehensive review of adult gender services in NHS Wales to ensure commissioned provision is efficient, effective and delivers high-quality care aligned to current evidence and system requirements. NWJCC commissions the gender care pathway for Welsh patients, including assessment, referral and ongoing care via the Welsh Gender Service, and access to surgery through NHSE via cross-border arrangements, but does not directly commission or provide surgery itself. NHSE commissions all gender surgery services, including the surgical pathway and provider contracts. The review of the Welsh Gender Service commenced in Q1, with scoping, methodology and stakeholder engagement progressing through Q2, followed by detailed assessment of demand, capacity, quality, cost and pathway effectiveness. This work is being undertaken in the context of increasing demand and emerging findings from the parallel NHSE national review. There is a clear opportunity to align the Welsh Gender Service review with NHSE methodologies, data frameworks and emerging service specifications to ensure consistency, comparability and futureproofing across systems. The review will focus on adult non-surgical services, with consideration of pathway interfaces, and will engage key stakeholders across HBs and partner organisations. Initial findings are expected in Q3/4, with a report and recommendations to the JC thereafter. The **NWJCC Annual Plan Delivery - Strategic Priority and Deep Dive Specifications** Report was received along with nine scoping documents that provided a consistent and proportionate overview of each strategic priority area, each of which was **approved** by the JC. It was noted that the information captured through the scoping documents would support the development of more aligned and consistent reporting, monitoring and oversight arrangements across the strategic priority portfolio during 2026/27. A report on **Clinical Support Hubs and NHS 111 Digital Front End** was received. Members **approved Option 2**: allocation of funding and commissioning responsibility of the Clinical Support Hubs to the NWJCC. This was an interim measure and aligned to discussions at the NHS Wales Leadership Board. Further work would be undertaken regarding longer term arrangements.

Status	Update
	The provision of the recurrent ring-fenced allocation for the development of the NHS 111 digital platform had also been granted to the NWJCC. This will allow the NWJCC to support, more strategically, the digital front end of the NHS 111 service.
Assure	The Committee received the following Sub-Committee assurance reports: - **Quality, Safety and Outcomes Sub-Committee** - **Planning, Performance and Finance Sub-Committee** - **CTMUHB Audit and Risk Committee** The **NWJCC Organisational Risk Register** as of 31 March 2026 was received and approved. There were 14 risks with a score of 15 or above as of 31st March 2026. The **Corporate Governance Report** included updates on Welsh Health Circulars, the NWJCC Internal Audit Programme and the ongoing review of hosting arrangements between the NWJCC and CTMUHB. The JC approved the Annual Governance Statement and endorsed the updated NWJCC Standing Orders, Standing Financial Instructions and the Guidance on the Handling of Interests, which are scheduled to be approved by all Health Boards.
Inform	The **Chair's Report** summarised the JC Strategy Session held on 14 April 2026, including key planning principles for the delivery of the NWJCC plan, assurance regarding key milestones and shared definitions of each priority area and roles and responsibilities. The **Chief Commissioner's Report** included updates on: ○ **WAST Performance Indicators** - Welsh Government (WG) feedback on the Annual Plan was positive and included a request for further information on WAST Performance indicators. ○ **CAR-T Service** - Ongoing conversations in relation to surge capacity for CAR-T with alternative centres secured including Bristol, Birmingham and London. ○ **NEPTS Eligibility -** Llais asked for consultation on any potential changes to NEPTS eligibility. ○ **St Andrews** - NHS England was currently looking at alternative providers for patients with plans being developed for St Andrews to retain some capacity. This will not affect Welsh patients. A June deadline had been given for removing Welsh patients from the site. ○ **Hereditary Anaemia Service** - A business case for the Hereditary Anaemia service was being developed by Cardiff and Vale University Health Board to improve workforce resilience, there was no timeline currently scheduled for completion. ○ **Collaborative Commissioning Leadership Group –** the meeting held on 21 April 2026 considered close-out of the NWJCC Foundation Plan 2025-26, delivery arrangements for the NWJCC

Status	Update
	Annual Plan for 2026-27 and also endorsed the findings and next steps for the NWJCC referral management review across the seven HBs. The Committee received the **Month 12 Finance Report 25/26**, **Month 01 Finance Report 26/27** and the **Operational Performance Report** ○ It was agreed that granularity of the Month 2 Finance report be enhanced for scrutiny at the next Planning, Performance and Finance (PPF) Sub-Committee and July's JC meeting.
Appendices	None.

3. ASSESSMENT

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC **Link to JCC Strategic Objectives(s)**	Maximise Value Ensure Quality; Reduce Duplication; Improve Equity & 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 Resilient Wales A Healthier Wales
Dolen i Hwyluswyr Ansawdd (Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / **Link to Enablers of Quality** (Duty of Quality Statutory Guidance (gov.wales))	Leadership Culture and Valuing People; Learning, Improvement and Research; Whole-systems Perspective
Dolen i Feysydd Ansawdd (Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / **Link to Domains of Quality** (Duty of Quality Statutory Guidance (gov.wales))	Effective Efficient; Equitable; Person-centred; Timely; Safe
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	No - Not Applicable

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: This is a summary of the latest meeting of the JCC
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 for Equality (delete as appropriate): ~~POSITIVE/~~NEUTRAL~~/NEGATIVE~~ Outcome for Welsh Language (delete as appropriate): ~~POSITIVE/~~NEUTRAL~~/NEGATIVE~~	If no, please include rationale below: This is a summary of the latest meeting of the JCC
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	
Enw da / Reputational	There is no direct impact on the reputation of the Joint Committee as a result of the activity outlined in this report.	
Effaith Adnoddau *(Pobl /Ariannol) /* **Resource Impact** *(People / Financial)*	Yes (Include further detail below)	
	The performance of the services will be used to develop the IMTP and identify the areas where resources may be required.	

4. RECOMMENDATIONS

The Health Board is asked to:

- **Note** the highlights outlined in Section 2 of this report.

ASSURANCE REPORT
NHS WALES SHARED SERVICES PARTNERSHIP COMMITTEE

Reporting Committee	**Shared Services Partnership Committee (SSPC)**
Chaired by	Huw Thomas, Executive Director of Finance at Hywel Dda University Health Board and Vice Chair of SSPC
Lead Executive	Neil Frow OBE, Managing Director, NWSSP
Author and Contact Details	Roxann Davies, Corporate Services Manager and James Quance, Assistant Director of Corporate Services
Date of Meeting	14 May 2026

Summary of key matters including achievements and progress considered by the Committee and any related decisions made

Managing Director's Update Report - The Managing Director presented a comprehensive update on key developments across NWSSP since the previous meeting, highlighting continued organisational maturity and impact as the organisation marked its 15-year anniversary, with sustained delivery of value, innovation and partnership across NHS Wales. Governance and accountability arrangements remain under development through the Implementation Group, supported by ongoing engagement, alongside positive external visibility following the Chief Executive's visit to IP5.

A balanced financial position was confirmed (subject to audit), including delivery of the £6m savings requirement to NHS Wales and Welsh Government, alongside full utilisation of capital funding to support strategic infrastructure, digital, estates, decarbonisation and resilience priorities. Ongoing focus on the Welsh Risk Pool was noted, supported by Welsh Government investment, with further work required to address emerging reimbursement pressures.

An update was provided in relation to development of key national programmes including Transforming Access to Medicines (TrAMS) and the Future Workforce Solution. While positive progress was noted in TrAMS, including advancements across regional hub developments and digital solutions, risks remain in relation to organisational approvals and Welsh Government sign-off, with potential delays linked to the formation of the new government. The Future Workforce Solution programme continues at pace but is impacted by external dependencies, including delays in documentation and outstanding clarity on system functionality.

Reasonable assurance was reported for the Single Lead Employer model following internal audit, with improvement required in specific operational areas, particularly sickness management processes, which the Committee noted as a shared responsibility. Significant risks associated with Resident Doctors' contract reform were highlighted, including operational, financial and compliance implications, with further detailed scrutiny provided to the Committee in the deep dive presentation.

The overarching report provided the Committee with updates across a broad portfolio, including Transforming Access to Medicines (TrAMS), Radiopharmacy and the Hub Programme; the NHS Wales Influenza Vaccination Programme; Primary Care Services;

Laundry Services; decarbonisation and adaptation activity; engagement and leadership activity; and awards and recognition.

In addition, the Committee was advised of the most recent developments in relation to senior appointments, including the appointment of Dr Martin Edwards as Medical Director, following the retirement of Dr Ruth Alcolado in March 2026; ongoing recruitment to the Deputy Medical Director role; and progress in the Chair's recruitment process, with interviews scheduled for 15 June 2026. Confirmation is awaited regarding Tracy Myhill OBE remaining in post until 30 June 2026.

The Committee **NOTED** and **DISCUSSED** the Managing Director's Update Report.

Deep Dive Presentations

Implementation of the Resident Doctor Contract Reform - The Committee received a detailed presentation on the implementation of the Resident Doctor contract reform, noting progress across a range of workstreams in line with a challenging timetable for the August 2026 go-live date. This included advancements in system development, contractual negotiations, policy development and organisational engagement. It was noted that the majority of contractual terms have been agreed with the British Medical Association (BMA), with final documentation nearing publication, and that associated policies are progressing through governance arrangements. The e-rostering system remains a key dependency, with revised timelines and interim arrangements in place to mitigate risks and support ongoing delivery. Variability in organisational readiness was recognised, alongside continued work to ensure compliance with rota requirements and to evidence workforce needs.

Key risks were highlighted in relation to workforce capacity, financial implications and the requirement for additional staffing to accommodate reduced working hours under the new contract. Mitigating actions, including enhanced workforce planning, bank usage and continued scrutiny of additionality requirements, were noted. The Committee was advised that programme governance arrangements are robust, supported by an active risk register and clear escalation processes.

Further assurance was provided through evidence of improved engagement across organisations, positive recruitment fill rates and progress in system solutions to support transition. Committee Members raised a number of queries relating to governance coverage, readiness assurance, benefits realisation, rota impact assessment and workforce additionality. It was confirmed that readiness is being monitored through structured processes and regular reporting, with post-implementation evaluation planned to assess outcomes and inform future phases.

Radiopharmacy at IP5 - The Committee received a presentation on the development of the new Radiopharmacy facility at IP5, noting significant progress and the successful completion and handover of the purpose-built facility in April. Commissioning is currently underway, with the programme progressing through a structured internal qualification phase to ensure that the facility, equipment, processes and workforce meet all required regulatory and operational standards. The specialised nature of Radiopharmacy services was acknowledged, including the complexity of manufacturing short shelf-life medicines and the requirement for robust quality assurance, safety and distribution processes. The comprehensive design of the facility, incorporating clean room environments, specialist equipment and controlled workflows aligned to stringent regulatory requirements was recognised.

The complex regulatory landscape was highlighted, with oversight from multiple bodies, and the need to ensure full compliance across environmental, staff safety and medicines regulation standards including updates to various licenses. The qualification process includes detailed testing and validation prior to progression to operational use. Plans for service implementation remain on-track for summer 2026, with a phased approach to go-live. Initial service delivery will be limited to Aneurin Bevan University Health Board to support workforce training and operational readiness, before scaling to a broader all-Wales service. Arrangements to maintain continuity of supply during transition, including collaboration with Swansea Bay University Health Board, were also noted.

Additionally, the Committee observed the virtual tour of the facility, providing assurance regarding the infrastructure, layout and technical capabilities supporting delivery.

The Committee **NOTED** the updates provided in relation to the implementation of the Resident Doctor Contract Reform and Radiopharmacy at IP5.

Items for Approval

NWSSP Performance Management Framework – The Committee **DISCUSSED** and **APPROVED** the application of the Performance Management Framework as set out in the paper and **NOTED** that elements may be subject to change pending revisions to Welsh Government accountability arrangements. The Committee was assured that arrangements are established and operating as intended, supported by regular and comprehensive performance reporting. The Framework provides clear oversight, aligned reporting and ongoing engagement with NHS Wales organisations, underpinned by defined governance principles and accountability through the Managing Director, as Accountable Officer.

NWSSP Duty of Quality Annual Report 2025–26 - The Committee **APPROVED** the NWSSP Duty of Quality Annual Report 2025–26, noting continued maturity in the organisation's approach to quality, with strengthened governance, enhanced visibility and a clear focus on delivering measurable outcomes across NHS Wales. The proportionate, system-wide approach to quality management was recognised, alongside ongoing development of an overarching quality management system to support continuous improvement.

Items for Noting

Chair's Appointment - The Committee **NOTED** the update regarding the Chair's appointment process, including progress and confirmation of interviews scheduled for 15 June 2026, with final shortlisting feedback awaited and interim arrangements in place, with the current Chair agreeing to remain in post to ensure continuity.

Finance, Performance, People, Programme and Governance Updates

Finance Report – The Committee noted the draft financial position for 2025/26, subject to audit, confirming the revenue position closed broadly in line with forecast, achieving a small surplus of £9k. Savings of £6.7m were delivered, including £0.7m applied to the National Insurance funding shortfall, with the remaining £6m returned to partners. Capital expenditure of £11.7m was achieved and delivery of key capital investments was noted, including Radiopharmacy developments and estates decarbonisation schemes, such as solar panels, electric vehicle infrastructure and hot water reclamation. The Welsh Risk Pool outturn of £192m was reported in line with forecast, supported by Welsh Government funding and Risk Share Agreement contributions, with continued growth in liabilities highlighted, including a £246m increase in provisions to £1.957bn and contingent liabilities rising to £1.2bn. Committee Members acknowledged the achievement of a balanced position while noting the scale of Welsh Risk Pool liabilities as a significant system pressure.

People and Organisational Development (POD) Report – The Committee noted the updated reporting format and the latest workforce position, with sickness absence remaining broadly stable, albeit above target in some areas, and turnover slightly above the NHS Wales average but trending downward and aligned with comparable organisations. Strong performance was noted in key areas, including PADR compliance at 85.62%, and time to hire remaining well within target, at approximately 55 days. Continued progress was reported across learning uptake, corporate induction improvements and workforce planning, supported by enhanced data and improved leavers' feedback, through increased response rates. It was confirmed that areas requiring improvement have been escalated to divisional Senior Management Teams, for action.

Performance Information Report – The Committee noted overall performance against key performance indicators for the period December 2025 to March 2026, with strong performance reported and ongoing engagement with organisations through quarterly reporting arrangements. It was highlighted that this represents the final year of reporting in the current format ahead of revised strategic objectives for 2026/27. Three indicators were reported as amber, including Audit and Assurance turnaround performance, impacted by delays in management responses, and customer satisfaction measures within Digital Workforce Solutions and Central Team e-Business Services, with contributory factors including system migration issues, staffing pressures and challenging scoring thresholds. Mitigations were noted as in place, with continued focus on partnership working and benchmarking to support improvement.

Outcome Measures Report – The Committee noted performance against outcome measures aligned to NWSSP's strategic objectives, with enhancements to reporting including increased use of statistical process control and expanded operational and customer metrics. Strong performance was reported across most service areas, with customer satisfaction targets achieved, as noted above. Increased operational activity was highlighted, including call volumes of approximately 17,000, meeting performance targets. Workforce indicators remained stable, with turnover aligned to sector benchmarks, and value measures demonstrated continued contribution to the foundational economy, with 44% of spend with Welsh suppliers. The inclusion of 'Voice of the Customer' appendix provided assurance through a summary of individual customer conversations, demonstrating that urgent matters are addressed promptly while highlighting key themes emerging from customer feedback.

Transformation Management Office (TMO) Update Report – The Committee noted the update on the TMO portfolio, including a refined approach to benefits realisation to strengthen reporting of value and impact. The portfolio currently comprises 17 projects, 2 programmes and 6 service improvement initiatives, with the majority of activity aligned to All Wales priorities. Generally positive delivery was reported, with key updates including completion of the TrAMS Radiopharmacy project and transition to post-project evaluation, improved progress within the Welsh General Ophthalmic Services (WGOS) contract reform programme, and ongoing delays to the Legal and Risk case management system, due to technical stabilisation issues. Assurance was provided that risks and mitigations are actively managed and that overall delivery remains within expected parameters.

Draft NWSSP Annual Governance Statement (AGS) 2025–26 – The Committee noted the draft publication, recognising its importance within the organisation's assurance framework and its role in providing transparency to the Committee, Velindre University

NHS Trust (as host) and wider stakeholders. The AGS reflects governance, risk management and internal control arrangements, including consideration of the Welsh Government-commissioned Independent Review of Accountability & Governance and a balanced assessment of strengths and areas for development. Committee Members were invited to provide further comments ahead of finalisation and approval, at NWSSP Audit Committee on 15 June 2026.

NWSSP Corporate Risk Register – The Committee noted the current position within a dynamic operating environment, with 17 risks for action identified including six rated red and 11 amber. Key red-rated risks relate to cyber security, pharmaceutical supply, delivery of Radiopharmacy and TrAMS developments, financial and workforce pressures, the Future Workforce Solution and Welsh Risk Pool forecasting. It was noted that certain risks are being maintained within risk appetite where full mitigation is not achievable, with ongoing monitoring and management actions in place. Assurance was provided that Committee business is aligned to the NWSSP Corporate Risk Register, supporting focused scrutiny and forward planning, with further detailed consideration of cyber security risks scheduled for a future meeting.

The Committee **DISCUSSED** and **NOTED** the above Reports.

Items for Information

The Committee received the following items for information:

- Finance Monitoring Returns (Month 12 of 2025-26)
- Personal Protective Equipment (PPE) Report
- Audit Wales Audit Assurance Arrangements for NWSSP 2025-26
- NWSSP Internal Audit Plan, Mandate and Charter 2026-27
- NWSSP Counter Fraud Plan 2026-27
- SSPC Forward Plan 2026-27

Part B - Private

The Committee **NOTED** and **ENDORSED** the proposed approach as set out in the Welsh Risk Pool Update.

Extraordinary (Private) Meeting of the SSPC Held on 25 June 2026

At its extraordinary meeting on 25 June 2026, the Committee (SSPC) **NOTED** that the appointment process for the new Chair had been undertaken in accordance with the SSPC Standing Orders and **APPROVED** the recommendation of the appointment panel chaired by an Independent Assessor appointed by Welsh Government.

Matters requiring Board/Committee level consideration and/or approval

The Board is asked to **NOTE** the work of the Shared Services Partnership Committee.

Date of Next Meeting	Thursday 16 July 2026, 10.00am to 12.00pm