



Our ref: MA/JMHSC/00617/26

Peter Fox MS  
Chair  
Health and Social Care Committee

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2 April 2026

Dear Peter,

Further to the Welsh Government's response to the Committee's follow-up Inquiry into Gynaecological Cancer, I committed to close recommendation five of your original inquiry report by providing the Cancer Recovery Programme milestones for gynaecological cancer before the end of the Parliament.

The Welsh Government established a National Cancer Recovery Programme in 2024 to support health boards to change service models and pathways for five priority cancer types, including gynaecological cancer. Additional funding of £2m has been provided annually to allow NHS Wales Performance and Improvement (formerly the NHS Wales Executive) to create a clinical consensus on service change and provide business change support to NHS organisations to implement it.

This work began with scoping and pathway definition for national optimal pathways and supporting guidance. This was followed by establishing governance and oversight through the previous NHS Wales Executive cancer reference group, and from March 2025, the NHS Wales Performance and Improvement (NHSPI) National Cancer Leadership Board. Since then, NHSPI's national cancer team has been supporting health boards to adopt the Post-Menopausal Bleeding/Unscheduled Bleeding on HRT pathway for women who otherwise have an absence of risk factors for endometrial cancer, available to all clinicians via Community Health Pathways. Adoption has been followed through in the one-to-one assurance meetings for cancer with health boards and monitored monthly by the National Cancer Leadership Board. All health boards have now implemented this recommended service change.

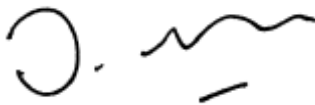
As this work has matured, NHSPI has identified further high impact changes that could support improved cancer waiting time performance for gynaecological cancer. This includes nurse-led hysteroscopy and the potential for increased consultant delivered ultrasound by gynaecologists.

To pursue these opportunities, NHSPI is considering the following as part of its planning intentions for 2026-27:

- Establishing a Gynaecological Cancer Oversight Group and agree a workplan in quarter one of 2026-27, aligned to January 2026's follow-up Unheard Report.
- Review health board pathways and assess readiness to change by the end of quarter two 2026-27.
- Support health board actions on improving quality and access to hysteroscopy and ultrasound between quarters three and four of 2026-27.
- Improve data capture and monitoring, aligned to the DHCW data development roadmap and NHS Performance Framework, during quarters 2 and 3 of 2026-27.
- Review of impact on pathway performance and early diagnosis from quarter 3 2026-27 onwards, given the 2–3-month lag on the 62-day pathway.

I hope this information helps to set out the recent action taken via the Cancer Recovery Programme and the planned next steps for gynaecological cancer.

Yours sincerely,

A handwritten signature in black ink, consisting of a large 'J' followed by a series of wavy lines and a short horizontal stroke at the end.

**Jeremy Miles AS/MS**

Ysgrifennydd y Cabinet dros Iechyd a Gofal Cymdeithasol  
Cabinet Secretary for Health and Social Care