

### Draft Savings and Cost Reduction Plans

SCHEMES COUNCIL	Description and Actions being Progressed	Saving/ Cost Reduction Council
<b>Manage Activity of OT Aids</b>	Increased cost of aids and adaptations require more budget control and scrutiny. Engaged with service who are undertaking review of processes to bring costs back within budget. There is a pressure associated with increasing material costs and increased volume. Work ongoing to assess recurring impact, current value of contracts and assessment of value for money.	£196,000
<b>High Cost Agency</b>	<p>We are aware of a number of packages which are reliant on use of agency staffing which significantly increases the cost of delivering care. A review is to be undertaken of High Cost Packages with an initial focus on specific packages where it is known that support plans can be re-configured leading to both a reduction in cost and importantly better outcomes for these individuals. Review of commissioning models to support these packages.</p> <p>A review of processes to be developed linking in with High Cost Panel/Adult Supported Accommodation and Residential Placement Panel (ASARP) Risk Enablement Management Group to improve processes for allocation of care and assessments of needs required, monitor and review.</p> <p>Review of options to consider a best value limit on the level of costs associated with High Cost Packages. Framework and definitions to be developed to ensure needs are met appropriately.</p>	£1,000,000
<b>External Contracts</b>	Review of External Contracts. Assessing options around resource across the whole system and ensuring services are being delivered as commissioned. Look to offset budgets against spend elsewhere in the system.	£320,000

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<b>Learning Disabilities/Mental Health/Physical Disabilities budget</b>	<p>Targeted reduction of 5% in spend to reduce overspend, considering option of doing this through a top slice. Is linked with agency spend and high cost spend reductions but need to understand further implications of progressing this. Needs further work to develop more detailed plans.</p> <p>A review of processes to be developed linking in with High Cost Panel/Adult Supported Accommodation and Residential Placement Panel (ASARP) Risk Enablement Management Group to improve processes for allocation of care and assessments of needs required, monitor and review and also assess options for spend to save including external provision.</p>	£1,800,000
<b>CASS</b>	<p>Review/reconfiguration of in-house service. Initial scoping has identified where capacity can be increased. Review of Management and Business Support Function Budget pressure identified but opportunities to redesign the service with a new operating model to address delayed discharges,, unmet need and align fully with Home Teams. Anticipated further savings can be achieved but not known at this juncture. Need to assess balance of internal and external provision.</p>	£500,000
<b>Direct Payments</b>	<p>Review of levels of provision of direct payments and consider robust criteria on payments for non-personal care.</p> <p>Review of options to consider a best value limit on the level of costs associated with Direct Payments. Framework and definitions to be developed to ensure needs are met appropriately.</p>	£2,174,000
<b>Analogue to Digital</b>	<p>Price increase for rental equipment to £1.15 per week/review charging processes to recover additional cost of digital equipment. Need to have in place for 2024/25 financial year. Requires a review of charging policies. Policy was due for review in 2019.</p>	£230,000
<b>Responder Service</b>	<p>Review of existing provision and consider risks associated with stopping service and explore alternative options ensuring we continue to support early intervention and prevention agenda.</p>	£100,000

SCHEMES COUNCIL	Description and Actions being Progressed	Saving/ Cost Reduction Council
<b>Removal of Sleepovers</b>	Test of change previously undertaken and was successful. Review and consider roll out programme across region. Review of policy associated. Current total spend on sleepovers of approx £2m.	£250,000
<b>TOTAL PROJECTED SAVINGS/COST REDUCTIONS</b>		<b>£6,570,000</b>

Notes:

1. Quantum against all lines remains indicative at this stage with further work required to firm up.
2. Savings are likely to be over a longer period than 12 months.
3. For the purposes of the financial plan, it has been assumed that £4m can be achieved.
4. This list reflects a mix of budget containment measures (cost reductions) and actual savings schemes.

SCHEMES NHS	Description and Actions being Progressed	Saving/ Cost Reduction NHS
<b>Medicines Budget efficiency target</b>	Target efficiency saving to reduce spend to below 22/23 budget levels. Medicines transformation workstream has been established led by the Chief Finance Officer and the Director of Pharmacy, to identify savings schemes which will deliver during 2023/24 and beyond and also to develop a rolling programme of future years schemes. This group meets on a monthly basis, reports into Health and Social Care Leadership Team and more regular report will be established in the new year through the Committees to provide assurance on delivery of savings. To date about 50% of the target has been identified.	£3,000,000
<b>Estates and Digital Programme</b>	There has been significant investment in our estates and digital infrastructure, this workstream considers work to capture the benefits from this investment and deliver cash efficiencies. This includes review of telephony, property disposals and introduction of digital solutions to deliver efficiencies.	£1,000,000
<b>Service Reviews</b>	A target has been set to focus on wider service review across the various operational. The detailed plans underpinning this target are being worked through by the General Manager, with a full assessment of any plans will be presented through the Health and Social Care Leadership Team and relevant IJB committee.	£1,160,000
<b>TOTAL PROJECTED SAVINGS/COST REDUCTIONS</b>		<b>£5,160,000</b>

Notes:

1. Numbers remain targets at this stage and only reflect recurring savings.
2. Savings are likely to be over a longer period than 12 months.
3. Work is ongoing to firm up numbers through the associated workstreams.