SWANSEA BAY LHB FINANCE DEPT.
PERFORMANCE & FINANCE COMMITTEE – SAVINGS UPDATE

Period 07 Data (October 2020)

Area of Opportunity	Sum of 20/21	Sum of 21/22	Sum of 22/23
Nursing Workforce	2,976	3,623	3,623
Non pay	2,010	2,010	2,010
Theatre Efficiency	2,225	4,360	4,360
Outpatient Modernisation	2,013	4,381	5,534
Patient Flow	2,126	5,569	9,013
Endoscopy	1,024	1,024	1,024
Business cases	2,700	2,700	2,700
Medical Workforce	983	1,545	1,545
Workforce	832	832	832
AHP	495	495	495
A&C	473	873	1,273
CHC	860	1,720	2,581
Maintenance	500	625	625
Ward skill mix	200	200	200
Diagnostics	42	42	42
Pathology	13	13	13
R&D	20	20	20
PFI	-	1,700	1,700
Management costs	-	1,950	3,900
Primary and Community services	-	2,000	5,000
Grand Total	**19,492**	**35,838**	**47,012**

Cost Improvement Plan area	Original Savings Plan £m
Management of surge capacity back to core bed base	4.00
Procurement	2.00
Medicines Management	2.00
Theatre Improvement	1.50
Patient Flow	1.50
Outpatients Improvement	1.50
General Efficiencies	1.00
Non-clinical, non-pay	1.00
Endoscopy	1.00
Medical Staff Rostering/Job Planning	0.50
Maintenance contracts	0.50
CHC Commissioning Team Review & Scrutiny	0.45
Improve 1:1 Care	0.40
International Nurse Recruitment	0.35
Project Management	0.33
Increase use of long shifts	0.30
Enhanced support for staff on LTS	0.30
Nurse Bank Auto Enrolment & Recruitment	0.30
A&C Agency	0.30
Collaborative Bank	0.25
Other	3.50
Total	**23.00**

The table on the left provides a summary of the areas of opportunity identified by KPMG.
The table on the right provides a summary of the Health Board agreed savings plans for 2020/21.

Medicines Management – Key Savings Areas

Sector (Primary / Secondary / HB Wide)	Status (Red / Green / Amber / Closed)	Savings Category	Scheme Name	Further Details	2020/21	2021/22
Primary Care	Amber	Drugs switch - excluding biosimilars	Alogliptin switch	Meds Man technicians to switch suitable patients on D	£ 180	£ 20
Primary Care	Red	Deprescribing (waste/volume reduction)	PPI restriction*	Full impact of ranitidine shortage to be understood bef	£ -	£ -
Primary Care	Amber	Anti-infectives	Antibiotics restriction	Based on a 5% reduction on overall annual spend.	£ 65	£ 45
Primary Care	Green	Drugs switch - excluding biosimilars	Vitamin D rationalisation	Switch from Fultium-D3 or generic colecalciferol 800un	£ 40	£ 30
Primary Care	Amber	Deprescribing - low clinical value	Paper 3 - HBGM / Vitamins	Rationalisation of HBGM to <£10.	£ 150	£ 100
Primary Care	Green	Loss of Exclusivity - Primary Care	Loss of Exclusivity	Solifenacin price reduction. Cinacalcet.	£ 180	£ 180
Primary Care	Red	Service Redesign	Insulin analogues	Initiative with diabetes department through employme	£ 3	£ -
Primary Care	Green	Dressings / Non Pay	Dressings	Switch of supply method from current GP/community p	£ 159	£ 120
Primary Care	Green	Service Redesign	Workplan	Meds Man team's workplan (includes prescribing clerks	£ 20	£ 15
Primary Care	Green	ScriptSwitch	ScriptSwitch	Based on maintaining current 37% acceptance rate. Me	£ 450	£ 450
Primary Care	Amber	Service Redesign	Care Home medicines management	New older people's services for medicines managemen	£ 10	£ 5
Primary Care	Red	Deprescribing - low clinical value	Emollients	Rationalisation of choice of emollients - requires furthe	£ 20	£ 15
Secondary Care	Green	Homecare / WP10HP	Omalizumab	Respiratory supply via WP10(hp) - 20% VAT Saving. 63%	£ 20	£ 20
Secondary Care	Green	Homecare / WP10HP	Aripiprazole	Homecare delivery (Abilify) leading to 20% VAT saving	£ 30	£ 30
Secondary Care	Closed	Drugs switch - excluding biosimilars	IV Diclofenac	Post-op pain, switch from Parecoxib to IV Diclofenac		
Secondary Care	Amber	Drugs switch - excluding biosimilars	LMX4	Switch to LMX4 4% cream from Ametop 4% Gel - 5g ins	£ 3	£ 3
Secondary Care	Amber	Biosimilar	Etanercept	Maximise biosimlar usage - currently only 70%. Focus o	£ 40	£ 40
Secondary Care	Green	Loss of Exclusivity - Secondary Care	Azacitidine	100mg in 1ml Vial -£321.00 to £240.75	£ 33	£ 33
Secondary Care	Green	Loss of Exclusivity - Secondary Care	Cinacalcet	90% contract saving on 30mg	£ 14	£ 14
Secondary Care	Green	Loss of Exclusivity - Secondary Care	Lipegfilgrastim	10mg/ml 0.6ml - £165 to £135	£ 7	£ 7
Secondary Care	Green	Loss of Exclusivity - Secondary Care	Posaconazole	100mg tablets 1 x 24 - £596.96 to £65.67	£ 2	£ 2
Secondary Care	Green	Loss of Exclusivity - Secondary Care	Posaconazole	100mg tablets 1 x 96 - £2,387.85 to £262.66	£ 11	£ 11
Secondary Care	Green	Loss of Exclusivity - Secondary Care	Posaconazole	200mg/5ml oral solution - £491.20 to £93.00	£ 2	£ 2
Secondary Care	Red	Loss of Exclusivity - Secondary Care	Bevacizumab	Patent expires Jun-20	£ -	£ -
Secondary Care	Red	Loss of Exclusivity - Secondary Care	Eculizumab (Soliris®)	Patent expires Apr-20	£ -	£ -
Secondary Care	Red	Loss of Exclusivity - Secondary Care	Natalizumab	Patent expires Jul-20	£ -	£ -
Secondary Care	Red	Homecare / WP10HP	Mepolizumab	On-going discussions to switch to homecare - Respirato	£ 10	£ 10
Secondary Care	Red	Anti-infectives	Ambisome	Restrict usage by utilising Caspofungin or Voriconazole.	£ 150	£ 150

Key Areas of Focus

- Demand and capacity modelling (Regular PTL meetings)
- Pre-assessment process and scheduling
- Daily ops reviewing previous and next day lists with turnaround of actions in 24 hours. Key themes to be escalated to weekly planning and challenge sessions
- Theatre booking and scheduling (642) across three hospital sites through weekly planning and challenge sessions
- Case mix review with prioritisation of BADS procedures – i.e. opportunity to transfer patients from hot to cold sites
- Surgical patient flow mapping (1st patient sending process, bed allocation process, reduction of turnaround between procedures etc.)
- Infrastructure review and redesign i.e. TAU review, trolley and kit availabilities, etc.
- Workforce i.e. portering, workforce skill mix
- Enhanced recovery supported by patient flow LOS work stream

Section	Priority Area	Key Deliverable	2019/20	20/21	21/22	22/23
Front Door	GP Acute Clinic	Extended hours - Singleton	█			
Front Door	GP Acute Clinic	Extended space		█	█	
Front Door	GP Acute Clinic	Unscheduled care		█	█	█
Front Door	GP Acute Clinic	Replication in Morriston	█	█		
Front Door	AEC	AEC Short term	█			
Front Door	AEC	AEC Long Term	█	█		
Front Door	Navigator	Create role profile\trial	█	█		
Front Door	ACP Presence	Recruit	█	█		
Front Door	Acute Frailty Service	OPAS - full support	█	█		
Front Door	Acute Frailty Service	ICOP - full support	█			
Front Door	Acute Frailty Service	Clusters at home		░	░	
Front Door	Day Hospital	Increase useage	█			
Front Door	Neuro Rehabilitation	Assess rehab requirements	█			
Front Door	Pathway redesign - Heart Failure	GP Upskilling		░		
Front Door	Pathway redesign - Heart Failure	MDT Clinic		░	░	░
Front Door	Pathway redesign - Heart Failure	Upskilling Secondary care	█			
Front Door	Pathway redesign - Gastro	Recruit nurses\consultants	█	█		
Front Door	Pathway redesign - Gastro	Insource gastroenterology		█		
Front Door	Pathway redesign - Gastro	Faecal calprotectin testing	░	█		
Front Door	Pathway redesign - Respiratory	Primary Care - COPD\CNS		█		█
Front Door	Pathway redesign - Respiratory	Asthma Front Door		█		
Front Door	Pathway redesign - Respiratory	Dedicated wards		█		
Front Door	Cardiology Clinics	Assess opportunity		█		
Front Door	Empowering the Frontline	Change management programme		█	█	█
In Hospital Pathway	Metric Management	KPI management		█	█	█
In Hospital Pathway	Swapping services – e.g. minor injuries	Move to Neath			█	
In Hospital Pathway	Heart failure	Upskilling\bed management	█	█		
In Hospital Pathway	Orthopaedic\Hip fracture	Investigation of options	█			
In Hospital Pathway	Vascular	Diagnostics closer to home	█			
In Hospital Pathway	Vascular	Discharge planning investigation	█			
In Hospital Pathway	Pancreatic Disorder	Part of Left Shift Lever work				
In Hospital Pathway	Discharge Planning	SAFER\Consistent planning	█	█		
Back office	Discharge Planning	Consistent planning		█		
Back office	Hospital2home	Assess patient group plan		█	█	
Back office	Hospital2home	Data review		█	█	
Back office	Hospital2home	ACT Service review\culture		█		
Back office	Social service with Nursing support	Investigation of options		█		
Back office	Social service with Nursing support	Delivery of change		█	█	
Transformational	Patient Activation	Implement usage			░	░
Transformational	Signal\Control Tower		█	█	█	█

Key Areas of Focus

- Improving booking processes to identify empty slots and increase fill rates. Process mapping of current booking processes, and identification of both value adding and non-value adding steps involved in the process, as well as process mapping desired booking process, and identification of steps required to achieve the ideal state.
- Aligning template structure to demand (including review of GP referrals into Outpatients and discharge rate).
- Reviewing regularly unfilled slots to remove restrictions and ensure they can be converted to a usable slot within agreed timeframes.
- Establishing accountability for slot utilisation from a clinical, operational and patient safety perspective.
- Implementing a Board-wide, weekly 6-4-2 meeting.
- Review late notice cancellation reasons to reduce empty slots due to patient cancellations.
- Review the postage and text reminder service to enhance rigour around timely and intelligent patient communications.
- Improve patient intelligence to ensure a list of patients who would welcome short notice slots is available to increase late notice fill rates.
- Developing more intelligent and automated reporting capabilities such as an empty slot monitoring tool and prospective booking report.
- Review of patient letters and communications to ensure that the correct information is contained within the letters (procuring a Hybrid Mail solution is an enabler of this).
- A project to ensure patient details on EPR are correct.
- Refresh of DNA communications to patients Board-wide.
- Review of specialties which do not employ the text reminder solution.
- Review of booking processes, SOPs and establishment within the central appointments office compared with local booking offices.
- Review of late notice cancellation reasons to reduce empty slots due to patient cancellations.