

# 2.4.1 - Appendix 1. BRIDGING THE FINANCIAL GAP

## Proposed savings plans – Specialised Services

Area	Description	Savings Type	Other Benefits	Potential Value	Recurrent?	Delivery Summary	Confidence
HPN - Products	Continue the switch of existing patients onto new providers following procurement	Efficiency – support provider 2% target	Business continuity -, less reliance on single provider	£800k – FYE	Recurrent	In progress. Commenced with provider and bag switches underway. Confidence improved following discussions with HPN providers.	High
HPN – delivery model and roll out of Insides protocol.	<p>1) Changing model from private nurse provision to NHS for HPN delivery.</p> <p>2) Roll out Insides programme, reduces LoS and minimises complications</p>	Efficiency – support provider 2% target	<p>Workforce sustainability in LHB community services.</p> <p>Patient experience and outcomes.</p>	<p>£250k - PYE Yr1</p> <p>£500k - FYE</p>	Recurrent	<p>HPN nursing model in development. Will deliver saving but may be in later years.</p> <p>Insides system plan worked up but no investment available for the invest to save element.</p>	Low
TAVI Devices – Valve cost and choice	Potential benefit of a Wales wide-procurement exercise	Efficiency – support provider 2%	<p>Standardisation</p> <p>Economies of Scale</p>	<p>£400k – PYE Yr1</p> <p>£800k - FYE</p>	Recurrent	<p>Opaque pricing from Provider’s procurement, includes rebates.</p> <p>Understand variation in utilisation.</p> <p>Financial analysis underway.</p>	Medium
CF Contract Changes	Change CAV contract terms for CF to align with new model and national standards	Efficiency – support provider 2%	Value	£1m - FYE	Recurrent	<p>Value review based on evidence. Some contract money being spent elsewhere to support sustainability.</p> <p>Risk this is caught in the rebasing work being undertaken</p>	Medium
Children’s Hospital for Wales – Contract Review	Review CHfW contract. Contract optimisation and supporting efficiency	Efficiency – support provider 2% CAV	<p>Mitigate risk of unfunded paed strategy</p> <p>Support sustainability</p>	Cost neutral	Likely a mix of recurrent and non-recurrent	<p>Work through with provider as part of Plan delivery.</p> <p>Potential savings in the future.</p>	Medium

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<b>Neuro-rehab Length of Stay</b>	Reduce number of patients exceeding the 8-week discharge window.  Requires HB commissioner focus.	Efficiency – support provider 2%  CAV SB	Patient experience  QoL	£600k - FYE	Non-recurrent	Requires all HBs to have sufficient community rehab capacity.  Data required from CAV., being picked up as part of oversight group for 2%.	Medium
<b>Bariatric Surgery – Policy</b>	Tighten access criteria and introduction of a new designated provider for North Wales	Efficiency – support provider 2%  SB	Value  Changing criteria may have a negative patient impact	Yr3 - Hold	Recurrent	North Wales provision moved to SBUHB who are noted to hold strict criteria in line with policy.  Provider designation process underway.  Impact of GLP-1s to be seen.  Residual patients in NCA may reduce savings 2026/27.	Medium
<b>Thrombectomy</b>	Maximise utilisation of existing provision  Contract optimisation	Managing current demand and unmet need	Value	£250k	Non-recurrent	Dependent on stroke pathway.  Ongoing negotiations with NBT on contractual terms	Medium
<b>BCU MS Drug Switches</b>	Switch MS drugs to biosimilars	Cash Releasing	Value	£1.3m - FYE	Recurrent	Needs BCU commissioning to lead.  May need some investment in BCU pharmacy to manage switches.  Discussed with provider who is happy to proceed.	Medium

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<b>Transplant patient optimisation</b>	<p>Increase number of patients eligible for transplant through use of GLP-1s.</p> <p>Pilots in South East and West Wales patients.</p> <p>Anticipated up to 6 additional patients suitable for transplant</p>	Cost avoidance for dialysis	Patient quality of life	<p>£42k – Yr1</p> <p>£144k – Yr 2 onwards, with cumulative effect</p>	Recurrent	<p>Roll out to South West.</p> <p>Evaluate pilot and north Wales readiness</p> <p>Consider spread and scale.</p>	High
<b>Renal Home Therapies</b>	Switching to NHS Supply Chain framework to improve costing model for home dialysis	Cost avoidance for dialysis	Business continuity being part of UK wide framework	£400k - FYE	Recurrent but requires regular review	Ready to go	High
<b>Unit Dialysis Cost Avoidance</b>	Maximising patients receiving home dialysis to avoid higher cost unit dialysis	<p>Cost avoidance for unit dialysis</p> <p>Gross investment £2.5m</p> <p>Avoids unit dialysis of £3.5m</p>	<p>Improved patient outcomes</p> <p>Improved patient quality of life and experience</p>	<p>£750k – PYE</p> <p>£1m - FYE</p>	Recurrent	<p>Increasing regional targets for home dialysis to 30% over 3 years of IMTP, so to 23.3% in year 1.</p> <p>Ready to go</p>	High
<b>Contract Optimisation</b>	<p>Review all lines in NHSE contracts.</p> <p>Ensure correct coding and costing of activity.</p>	<p>Invest to Save</p> <p>Cash Releasing</p>		<p>£400k – PYE Yr1</p> <p>£900k – FYE Yr 2</p>	Recurrent but requires regular review	<p>Needs dedicated contracts manager to work through</p> <p>Plan being drawn up</p>	Medium

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IVF - Policy	<p>Review policy following NICE review and consider access criteria.</p> <p>Estimates for age changes included.</p> <p>Could consider not allowing surrogacy, sperm procurement, restricting cycles.</p>	Cash releasing	<p>Value</p> <p>Negative patient impact</p>	<p>Reduce age to 38 - £1m – FYE</p> <p>Reduce age to 35 - £1.9m - FYE</p>	Recurrent	<p>Clinical impact assessment</p> <p>Stakeholder engagement</p> <p>Restricting access or reducing age would be against the anticipated direction of travel of NICE guidance.</p> <p>Could consider not allowing surrogacy, sperm procurement, restricting cycles.</p>	Low

### Additional schemes considered but not being progressed at this stage

Area	Description	Delivery Summary
Cardiac Surgery	Linked to the JCC Cardiac Review: Fixed cost scrutiny and productivity analysis.	Not in 26/27 – await Cardiac review output
Interventional Cardiology	Linked to the JCC Cardiac Review: Alignment with policy, review of over-performance	Not in 26/27 – await Cardiac review output
Neonatal Review	Linked to JCC Neonatal Phase 2 Review: Cot configuration work related to number of commissioned cots, including neonatal transport	Not in 26/27 – await Neonatal review output
Welsh Fertility Institute - IVF	Review of contracted levels and value	Contract confirmed as per 25/26 so no change for this year.
ALAS	Review of funding uplift and service delivery model	Requires investment so any efficiencies/improvements would not be cash releasing. 2027/28 Intention
Paediatric Oncology	Alignment of funding with activity and outcomes; activity coding to be analysed	Part of rebasing – CH review
Paediatric Respiratory	Uptake, savings realisation, and reinvestment	Potential consumables review
Specialist Hearing Implant Device Service	Review of contract and performance. Preparation for designated provider process.	Full review needed, need to factor in escalation and quality issues.