

Ref.	Summary	IJB Lead	Responsible Manager	R/NR	Saving 18/19 £'000	Saving 19/20 £'000	Financial Risk	EQIA / Clinical/ Care Risk Assessment	Description of Proposal and Associated Risk
SC1	Third and independent sector efficiency - high cost packages of care	Head of Partnership Services	Commissioning Manager	R	50	0	H	Risk assessments will form part of each individual assessment	We will pursue a targeted cost management agenda with the local providers, focusing on generating efficiencies by reducing high cost packages of care through a needs-led reassessment. Efficiencies won't be taken unless the same outcomes can be delivered and needs met. All other third sector organisations to be provided with flat cash grant settlements, meaning pressures such as pay inflation will need to be met from other income sources.
SC2	Reduce the cost of bespoke high cost packages	Head of Partnership Services	Commissioning Manager	R	115	0	H	Risk assessments will form part of each individual assessment	This proposal would allow us to reduce high-cost packages. Group based activities may increase service user risk if not appropriately supported. Workforce design issues to consider, along with new arrangements with third sector partners. Given the increasing amounts paid on the provision of sleepover arrangements, there is a case for reviewing whether these are always necessary and/or could be substituted with technology support focusing on generating efficiencies by reducing high cost packages of care through a needs-led reassessment. Efficiencies won't be taken unless the same outcomes can be delivered and needs met.
SC3	Tackling isolation through grouping social care - eg lunch groups	Head of Locality Services	Service Improvement Officer	R	0	20	M	This will be undertaken as a two-year programme of reform. EQIA will be required in time to assess impact of service change.	This would involve making use of transport to bring older people together at the Grianan café at lunchtime. Issues of client choice make the saving uncertain. Transportation may also increase risk of falls and injury but would help tackle social isolation and improve independence. Identified as a saving for 2019/20 given current uncertainty about use of Grianan/redesign of Ardseileach day centre.
SC4	Introduce our approved charging regime for social care services and apply increases to existing charges	Chief Officer	Head of Revenue and Benefits	R	30	0	M	EQIA undertaken as part of original policy development.	The charging policy is already approved. The main risk is around the projected income (generated from assumptions about share of national total) and implementation of new policy. Further risk that future national policy will outlaw charging for non-residential care in future years, though this ought to be financed by Scottish Government.
SC5	Repatriate mainland placements	Head of Partnership Services	Social Work Service Manager	R	10	50	M	Risk assessments will form part of each individual assessment	This proposal assumes that we can move away from individualised packages, towards group based activity and care. There are arguably opportunities to improve outcomes in this context, to ensure that more time is spent with service users' peer groups. However, local recruitment challenges limit our opportunities to maximise the potential of this line.
SC6	Invest in fleet cars for the homecare workforce to reduce amount of travelling expenses	Head of Locality Services	Head of Revenue and Benefits	R	10	0	L	Risk assessment in place	This would involve investing in Comhairle-owned vehicles in order to reduce the year-on-year travel costs associated with this service area. The proposed saving is modest, although there are wider corporate savings against the same line. Issues would need to be worked through with trade union colleagues.
SC7	Opportunistic vacancy savings of 1% on CNES pay budgets	Chief Officer	Chief Officer	R	150	0	M	Risk assessments will underpin any post that is not filled	This would recognise that the social care budgets will offer up opportunistic savings due to difficulty in recruiting to posts. Vacancy savings will not be targeted against specific posts and posts will not be kept vacant unless subject to resign or demand does not require them to be filled.
SC8	Review of Eligibility Criteria	Head of Partnership Services	Commissioning Manager	R	0	50	H	EQIA would be required before any policy change could be enacted.	Potential to cap high cost packages at home would be explored. This would require a review of existing eligibility thresholds, particularly around thresholds for individual packages. Would be subject to legal advice.
SC9	Residential Care Income	Chief Officer	Head of Revenue and Benefits	R	55	0	M	Risk assessment suggests that income target can be met.	We have used very prudent income calculations in previous years, which have often resulted in higher-than-anticipated income at year-end. We are seeking to increase the income assumptions by £55k for 2018/19

NHS1	Redesign of school nursing capacity	Head of Locality Services	Lead Nurse, Community	NR	10	0	L	Risk assessment in place	Proposal to freeze school nursing Band 5 0.4 wte post for 9 months pending redesign of School Nursing service to comply with the national refocused role of School Nursing. Development of a band 6 role from Jan 2019 complies with government objectives to meet the needs of the school age population in Uist.
NHS2	East side SCN frozen ahead of redesign	Head of Locality Services	Lead Nurse, Community	R	60	0	M	Risk assessment in place	This post has already been frozen for several years, with a single SCN managing the two community nursing teams. While this is not without impact, it allows us to think about more permanent restructuring and re-allocation of responsibilities across the SCNs in Lewis and Harris.
NHS3	Specialist Nursing Redesign	Head of Locality Services	Lead Nurse, Community	R	27	0	M	Risk assessment in place	This is subject to ongoing review. A Band 8b specialist nurse is due to retire mid-year. Proposal to reduce to 0.8FTE. Proposal would have limited impact on overall clinical time but would provide more strategic role around palliative care, in line with Scottish Government policy.
NHS4	Prescribing - increase in Rebates	Chief Officer	Associate Medical Director	R	50	50	L	Assessment suggests that income target can be met.	This efficiency measure is intended to cover all generic drugs, rebates and income generation sources.
NHS5	Efficiencies in Community Dental Services	Director of Dental Services	Dentistry, Service Manager	R	77	0	L	Risk assessment in place	This allows for the delivery of oral health objectives within the establishment while continuing to meet core obligations. Savings can be achieved without adversely affecting oral health outcomes
NHS6	Efficiencies in Central/Local Decontamination	Director of Dental Services	Dentistry, Service Manager	R	43	0	L	Corporate assessment	General inter-departmental efficiency measure
NHS7	Rental Income generation within WI Dental Centre	Director of Dental Services	Dentistry, Service Manager	NR	18	0	L	Assessment suggests that income target can be met.	Income generation from temporarily accommodating the new independent practice within WI Dental Centre, ahead of a transition to new premises in the summer
NHS8	Vacant Post CN Westside Band 6 Freeze	Head of Locality Services	Lead Nurse, Community	NR	35	0	L	Risk assessment in place	Existing post-holder is on a career break and proposal is to freeze the post. In the short term this absence can be absorbed within the team with occasional requirement for bank to substitute the vacant hours. In the long term this post requires to be prioritised to support the national transforming district nursing role agenda.
NHS9	Vacancy Efficiencies AHP	Head of Partnership Services	Service Managers, OT and Physiotherapy	NR	30	0	M	Risk assessment in place	To utilise unallocated resource (due to maternity/part-time working) from Physiotherapy as an in-year efficiency, alongside a £10k contribution from OT. In the short term this absence can be absorbed within the team
NHS10	Mental Health Redesign/Vacancy Management	Associate Director Mental Health and Learning Disabilities	SCNs	NR	23	0	M	Risk assessment in place	To delay transition to new arrangements as we move from Clisham closure to community mental health capacity. Savings associated with a vacancy freeze can only be realised when the ward closes. Mental health redesign requires the transfer of ward based resources into the community to reduce the number of admissions and lengths of stay. Any reduction in the projected work force requirements will impact on the strategic aims of the redesign and could result in at risk patients being admitted to hospital because of the unavailability of 24/7 community resource. Additional vacancy management tools will be used to manage this pressure, with the mental health change funds being used as a backstop.
NHS11	Reduced sickness absence NHS staff	Chief Officer	Chief Officer	NR	182	0	H	Corporate assessment	In line with wider corporate targets, a more demanding threshold around staff sickness absence has been applied. Generic target to improve sickness absence through deployment of corporate tools like EASY and enforcement of local policy through effective line management. However, this remain a high risk saving proposal given that we are not fully in control of levels of illness and we have an ageing workforce.
NHS12	Disestablish Vacant Chasp PA post	Chief Officer	Chief Officer	R	18	0	L	Not required	Vacant and not required
NHS13	Freeze AHP Lead Band 6	Head of Partnership Services	Head of Partnership Services	NR	10	0	L	Not required - post not yet established	To allow the new integrated structure to embed, the Head of Partnership Services will spend six months with AHP service managers to discuss and agree AHP lead arrangements
TOTAL IJB Saving Plan					1,003	170			