

Review of Cost Savings Arrangements – Aneurin Bevan University Health Board

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Introduction

- 1 NHS Wales is facing unprecedented financial challenges. The legacy of the COVID-19 pandemic on service demand, the rising costs associated with staffing, energy, medicines, maintaining an ageing estate; and tackling the increasingly complex health conditions associated with an ageing population all contribute to the worsening financial situation across the NHS.
- 2 Despite the Welsh Government making an additional £425 million available to the NHS in October 2023, the 2023-24 year-end audited position for NHS Wales was a collective deficit of £183 million. Whilst some NHS bodies were able to achieve year-end financial balance, the position for others – particularly some Health Boards – was challenging, with several not being able to deliver the control total deficit expected by the Welsh Government.
- 3 The position for 2024-25 is equally, if not more challenging. Health bodies will need to ensure that they have robust approaches in place to identify and deliver in-year cost improvement opportunities and to also take a longer-term approach to achieving financial sustainability that moves away from short-term approaches to ones where savings are achieved by transforming service models and ways of working.

Objectives and scope our work

- 4 Given the challenges outlined above, the Auditor General has undertaken a programme of work examining NHS bodies' approaches to identifying, delivering, and monitoring sustainable cost savings opportunities. Whilst our more detailed work has been targeted at health boards, we have also undertaken high level work at Special Health Authorities and NHS Trusts, linked to the specific functions of those bodies. The findings from our work at Aneurin Bevan University Health Board (the Board) are set out in this report.
- 5 The work has been undertaken to discharge the Auditor General's statutory duty under Section 61 of the Public Audit (Wales) Act 2004 to be satisfied that the Health Board has proper arrangements in place to secure economy, efficiency, and effectiveness in its use of resources.
- 6 This review builds on our 2022 Review of Efficiency Savings Arrangements that included nine recommendations. Those recommendations have now been superseded by the recommendations from this current review as detailed in **Exhibit 2**.
- 7 We undertook our work between February 2024 and May 2024. The methods we used to deliver our work are summarised in **Appendix 1**.

Key findings

- 8 Overall, we found that **whilst the Health Board did not achieve its deficit control total or savings target for 2023-24, it delivered significantly more savings than in prior years. However, its financial position remains very challenging. As a result, it urgently needs to develop a longer-term financial plan focused on achieving recurrent savings from transformational service change, and further embed its savings approach through its Value and Sustainability Board to strengthen its savings arrangements and prevent its financial position from deteriorating further.**
- 9 The findings that support our overall conclusion are summarised below under the following headings:
- Identifying cost improvement opportunities
 - Delivering cost improvement opportunities
 - Monitoring and overseeing cost improvement opportunities

Identifying cost improvement opportunities

- 10 The Health Board has clear arrangements in place for identifying and analysing the areas that are driving its costs in the short to medium term, namely variable pay (agency, bank, and locum), Continuing Health Care, prescribing, energy, delayed transfers of care, growth in demand for Cancer services, provision of SAFE services, and more general demand and capacity challenges. Despite this, the Health Board failed to meet its deficit control target of £13 million for 2023-24, instead reporting a year-end outturn deficit of £49.8 million. These high-cost areas continued to be the key contributors to the Health Board's significant reported opening underlying deficit of £81.4 million for 2024-25.
- 11 The Health Board's Annual Plan for 2024-25 forecasts a £48.9 million deficit, which is £36.9 million higher than the Welsh Government's agreed control deficit total. However, as at the end of August 2024, the Health Board was forecasting an overall in-year deficit of £47.9 million, which is a £1 million improvement against its submitted plan. Given these significant financial challenges, the Health Board is developing a three-year recovery plan as part of an agreed route map to sustainability (see **paragraph 19**). Whilst this is positive, the Health Board also needs to develop robust longer-term financial plans (alongside its long-term organisational and clinical strategies) to provide assurance that it has a clear framework in plan for identifying, mitigating, and managing its significant cost drivers beyond 2026-27. **(Please refer to the recommendation on long-term financial planning in our 2024 Structured Assessment Report)**
- 12 The Health Board uses evidence from a wide range of data sources to analyse and identify savings opportunities. This is a key element of the work of the Health Board's Value and Sustainability Board, which meets fortnightly to consider progress across defined savings workstreams (such as workforce, medicines

management, and service redesign) using data from CHKS¹, VAULT², GIRFT³ reviews, and audits. The identified opportunities are captured within the Health Board's Compendium⁴, which provides a central repository for identifying and monitoring progress on both national and local savings opportunities. However, the opportunities identified in the Compendium are largely focused on delivering savings in the short term rather than longer-term savings that have been identified from transformational service change within the Health Board. Furthermore, the Compendium has not been fully utilised across all areas of the Health Board. Additional work is therefore needed to ensure that all service areas utilise and realise the full potential benefits of the Compendium. **(Recommendation 1)**

- 13 Although the Health Board has a defined approach in place for canvassing, capturing, and assessing cost savings opportunities and best practice from staff, it is not clear to what extent these ideas and suggestions then become fully formed savings schemes. Also, the extent to which the Health Board routinely canvasses savings suggestions and ideas from service users and other stakeholders is unclear. **(Recommendations 2.1 and 2.2)**
- 14 The Health Board's Value and Sustainability Board provides oversight of the organisation's arrangements for identifying and assessing the quality implications of savings schemes. The level of detail required for the quality impact assessment is dependent on the scale of the scheme and its likely impact on patients, Health Board objectives, and partners. The Health Board is also developing other mechanisms to assess impact, risks, and benefits for savings schemes that require investment, such as its Pre-Investment Panel. Despite these defined processes, there is an inconsistency in the extent to which they have been routinely applied across all identified savings schemes. **(Recommendation 3)**

Delivery of cost improvement opportunities

- 15 As shown in **Exhibit 1**, the Health Board has a variable track record of achieving its overall and recurrent savings targets. Whilst the Health Board delivered significantly more savings in 2023-24 than it had delivered in prior years, delivery of overall savings, and in particular recurrent savings, continues to present a challenge and impacts on the Health Board's ability to meet its required year-end position. **(Recommendation 1)**

¹ CHKS – Caspe Knowledge HealthCare Systems is a provider of healthcare intelligence, benchmarking, and quality improvement services.

² VAULT – The Value, Allocation, Utilisation and Learning Toolkit is managed by the NHS Executive to support and improve resource utilisation across the Welsh NHS.

³ GiRFT – Getting it Right First Time are programmes designed to improve the treatment and care of patients through in-depth review of services, benchmarking, and presenting a data-driven evidence base to support change.

⁴ Compendium – Is the Health Board's repository for savings and efficiency ideas and initiatives, drawn from a wide variety of sources.

Exhibit 1 – Health Board’s savings track-record between 2018 and 2024

Year	Overall Savings Target (£M)	Actual overall savings delivered (£M)	Recurrent savings as a % of overall savings target	Delivered non-recurrent savings (£M)	Delivered recurrent savings (£M)
2018-19	28	28	64.3%	10	18
2019-20	16.8	15.5	56.5%	6	9.5
2020-21	33	9.5	25%	1.2	8.3
2021-22	16.6	16.5	66%	5.5	11
2022-23	26.2	23	19%	18	5
2023-24	51.5	43	54.3%	15	28

Source: Welsh Government Monthly Monitoring Returns and Health Board Finance Reports

- 16 The Health Board’s position on the delivery of savings in 2023-24 would have been significantly worse than reported if it had updated its overall savings target to reflect the Welsh Government’s additional 10% savings requirement of £11.3 million⁵ and the additional deficit of £33 million identified as part of its mid-year review of the 2023-24 Annual Plan. Whilst the Health Board reported the need to deliver additional savings to meet the additional 10% requirement in overall terms and address the increased mid-year underlying deficit, it did not amend its original savings target of £51.5 million to reflect these additional elements. As a result, this was not part of its routine reporting on savings to the Board and the Finance and

⁵ The Welsh Government’s additional 10% savings requirement of £11.3 million was set to deliver the control total deficit of £13 million. It was based on the Health Board’s original 2023-24 Annual Plan, which forecast a deficit of £112 million and not the £145 million deficit forecast as part of the Health Board’s mid-year review.

Performance Committee (F&PC). Incorporating the additional savings target would have provided a more accurate picture of the overall savings required for 2023-24, resulting in a savings target of £96 million and a reduction in the percentage of recurrent savings delivered, from 54.3% to 30%. **(Recommendation 4)**

- 17 The Health Board's savings planning is primarily focused around its annual planning process. As part of its 2023-24 budgetary control procedures, those with divisional and directorate budgetary responsibilities formally received their savings targets through the Delegation Letter, which required them to deliver savings through a mix of generic, specific, focused and stretch savings⁶. For 2024-25, the Health Board has used a two-part budget setting process. The first stage involved an initial delegation of the approved levels to divisions and directorates, followed by a second delegation during quarter 1 as part of finalising the financial savings and cost pressure plans for the year. The second stage of the budget setting process was due to take place in the second quarter of 2024-25 and aimed at ensuring the delegated savings targets are based on more robust information.
- 18 In August 2024, Internal Audit provided a reasonable overall assurance rating on the Health Board's arrangements for savings planning. Despite this relatively positive position, the Health Board's financial position for 2024-25 and beyond remains challenging in terms of savings delivery.
- 19 The Health Board has made some positive initial steps to develop a short-medium term financial plan. In July 2024, it approved a three-year route map which aims to achieve its £13 million control total by 2025-26 and deliver financial balance by 2026-27. The plan will focus on key opportunities areas such as workforce, estates, service reconfiguration, and efficiencies/improvements in productivity. The Health Board's financial route map will need to be routinely refreshed to ensure it reflects internal and external risks and remains current. At the time of our review, the granular 'delivery plan' and financial details within the route map were still being developed. **(Recommendation 5)**
- 20 The Health Board has invested in developing financial skills and capabilities to support its savings delivery; however, aspects of its financial capabilities need to be further improved. The role of Financial Business Partners⁷ to support directorates and divisions around savings planning and delivery is highly regarded by senior officers. However, despite investment in developing some general online financial training tools, there is scope to increase finance training for managers and leaders. **(Recommendation 6)**

⁶ Delegation Letter 2023/24 – (a) generic savings target of 0.75% for executive areas and 0.5% for other areas; (b) specific savings plans have been applied where there is reasonable expectation of delivery; (c) focussed opportunities where there is an indication that savings could be made but further work is required; and (d) stretch targets where applicable these include areas of spend slippage and possible funding.

⁷ The Financial Business Partner is a role that has responsibility for working with the divisions and directorates team providing financial support and information to support planning and operational management.

Monitoring and oversight of cost improvement opportunities

- 21 The Health Board has well-developed arrangements in place for monitoring the delivery of savings. The finance reports, which form the basis of its savings reporting, provide both a summary of progress against the key cost drivers and granular detail on savings performance across the divisions and directorates within in the report's appendices. This level of detail enables the Board, the Value and Sustainability Board, and F&PC to both understand overall savings progress and, if necessary, scrutinise progress on savings delivery at a more granular level.
- 22 The Health Board has a relatively new internal accountabilities framework in place which is designed to allow the Executive Team to hold directorates and divisions to account for their service and financial performance. However, the framework does not yet appear to be fully effective, as some areas (such as Corporate Services and Scheduled Care) are significantly underachieving against their savings targets. **(Recommendation 7)**
- 23 The Health Board receives additional external scrutiny from the Welsh Government over its finances following changes to its escalation status⁸. For the 'expected outcomes for its approach to savings', the Health Board needs to ensure that there are robust policies and processes around savings leading to the delivery of short-term and longer-term transformational savings. Progress against these outcomes is routinely monitored by Board and the F&PC alongside specific monitoring meetings with the Welsh Government's Finance Team at the NHS Executive. As at September 2024, the Health Board reported that it was undertaking work to address all of its escalation objectives around Finance, Strategy and Planning.
- 24 The Health Board has clearly identified its strategic financial risks and has appropriate financial management structures in place, including the Board Assurance Framework and Corporate Risk Register. The mitigating actions and controls for these risks appear to be reasonable, and they are regularly reviewed by relevant committees and the Board. However, the Health Board's financial challenges remain, which suggests that the controls and actions might not be achieving their desired impact. **(Recommendation 8)**
- 25 The Health Board continues to carry risk within its identified savings schemes. Whilst it had identified the majority of its savings schemes for the submission of its 2023-24 Annual Plan, 37% of these savings were categorised as red, meaning they carried a significantly high delivery risk. 16% of these red risk schemes remained undelivered at the end of 2023-24. The Health Board's 2024-25 Annual Plan identified 89% of the savings as either category green or amber, with the

⁸ In January 2024, the Welsh Government escalated the Health Board to Targeted Intervention for Finance, Strategy and Planning under its Escalation Framework. This has seen an enhanced level of scrutiny by the Welsh Government over the progress the Health Board is making against a defined set of 'Expected Outcomes'.

remainder categorised as red. Whilst this is an improvement on the 2023-24 position, the underlying savings figure (see **paragraph 16**) required to achieve its control total for 2024-25 is significantly greater than the Health Board's current reported savings target. (**Recommendation 9**)

- 26 The Health Board has clearly prescribed processes in place to evaluate and improve cost savings arrangements which draw on audit findings and best practice. The Health Board's Value and Sustainability Board and its Compendium tool are also key mechanisms used to share initiatives, best practice, and learning in both identifying and delivering savings. However, the extent to which the Health Board shares learning across divisions and directorates for schemes that have failed to deliver or underperformed is not clearly defined or systematically applied across the organisation. (**Recommendation 10**)

Recommendations

- 27 **Exhibit 2** details the recommendations arising from this audit. The Health Board's management response to our recommendations is summarised in **Appendix 2**.

Exhibit 2: Recommendations

Recommendations

- R1 The Health Board needs to work quickly with its divisions and directorates to develop and implement a more consistent approach to the adoption of savings opportunities within its compendium, which will also need to include a greater level of transformative, cross service efficiencies and recurrent savings, to ensure its savings are put on a more sustainable footing. (**Paragraph 12 and 15**)
- R2.1 The Health Board should clearly demonstrate how the savings and efficiency ideas that it canvasses from its staff are then used to inform and shape deliverable savings schemes. (**Paragraph 13**)
- R2.2 The Health board should put clear arrangements in place to canvass savings and efficiency ideas from service users and other stakeholders (**Paragraph 13**)
- R3 The Health Board should ensure that all relevant staff are applying its quality impact assessment approach on savings schemes in a consistent manner. (**Paragraph 14**)

Recommendations

- R4 The Health Board should strengthen its approach to the reporting of cost savings by ensuring that future savings reports to Board and committees articulate all the savings the organisation needs to deliver each year to meet its Welsh Government control total deficit. **(Paragraph 16)**
- R5 The Health Board should continue to refine and update its medium-term financial plan (route map) to 2026-27 based on internal and external delivery risks and quickly take corrective action where there is slippage in its planned financial trajectory. **(Paragraph 19)**
- R6 The Health Board should ensure that its current financial training and capacity building for its budget holders is sufficiently fit for purpose. **(Paragraph 20)**
- R7 The Health Board should ensure its accountabilities framework is working as intended and acting as an appropriate lever to manage divisional and directorate underperformance against savings targets. **(Paragraph 22)**
- R8 The Health Board and its committees need to ensure that its identified controls and mitigating action for its strategic financial risks are fit for purpose and that their ongoing scrutiny clearly identifies remedial action where these controls are not having the desired impact. **(Paragraph 24)**
- R9 The Health Board should continue to strengthen its approach to identifying and developing saving schemes with a view to reducing the number of schemes that are rated as red, and to maintain a focus on moving its red and amber schemes to green. **(Paragraph 25)**
- R10 The Health Board should strengthen its current mechanisms for sharing learning on savings schemes to ensure that it gathers and then disseminates learning from schemes that have failed or underdelivered. **(Paragraph 26)**

Appendix 1

Audit methods

Exhibit 3 below sets out the methods we used to deliver this work. Our evidence is limited to the information drawn from the methods below.

Element of audit approach	Description
Documents	<p>We reviewed a range of documents, including:</p> <ul style="list-style-type: none">• Board and Committees agendas, papers, and minutes• Key organisational strategies and plans• Savings benchmarking data• Key risk management documents, including the Board Assurance Framework and Corporate Risk Register• Key reports and plans in relation to organisational finances and savings• Reports prepared by the Internal Audit service
Interviews	<p>We interviewed the following senior officers:</p> <ul style="list-style-type: none">• Executive Director of Finance and Procurement• Medical Director and Deputy Chief Executive• Director of Workforce and Organisational Development• Interim General Manager – Scheduled Care• Chief Operating Officer• General Manager – Medicine Division• Executive Director Strategy Planning and Partnership• Head of Strategic Financial Planning

Element of audit approach	Description
Observations	<ul style="list-style-type: none"> • Finance and Planning Committee

Appendix 2

Management response to audit recommendations

Exhibit 4: Aneurin Bevan University Health Board management response to our audit recommendations.

Ref	Recommendation	Management response	Completion date	Responsible officer (title)
R1	The Health Board needs to work quickly with its divisions and directorates to develop and implement a more consistent approach to the adoption of savings opportunities within its compendium, which will also need to include a greater level of transformative, cross service efficiencies and recurrent savings, to ensure its savings are put on a more sustainable footing.	<p>The Health Board will continue to populate and promote the 'Opportunities Compendium' with up-to-date benchmarking intelligence with information from multiple sources, including CHKS, GIRFT, Annual Costing Returns and NHS Benchmarking network, as well as other best practice exemplars and guidelines including the NHS Wales Vault and National Value and Sustainability Board recommendations.</p> <p>This resource has been developed through the Finance Directorate over many years and is shared and communicated regularly with the Executive Team, Divisional services as part of in year and annual planning considerations, the Finance and Performance Committee, and the Value and Sustainability Board.</p>	Completed as part of existing process	Executive Director of Finance

Ref	Recommendation	Management response	Completion date	Responsible officer (title)
		<p>Operational investments, changes and improvement plans include an assessment of benchmarks and comparators as part of evaluation.</p> <p>These opportunities may impact both system and specialty level savings including short-term and long-term service sustainability from theatre productivity through to potential bed rationalisation and thus site reductions.</p> <p>The expectation is that budget holders will review, consider and identify actions to implement appropriate changes to achieve better efficiency and cost reductions, while maintaining safe care for patients.</p> <p>The Health Board will continue to advocate the resource as a source of improvement opportunities and expect budget holders and service managers to utilise it to identify and deliver financial benefits and efficiency delivery.</p>		
R2	R2.1 The Health Board should clearly demonstrate how the savings and efficiency ideas that it canvasses from its staff are then used to inform and shape deliverable savings schemes.	<p>The first tranche of savings ideas from staff have been reviewed and assessed by the Health Board Value and Sustainability theme executive leads. The plethora of ideas received identified many issues that were being progressed where appropriate to do so and new ideas shared directly with service leads for consideration. Feedback on key initiatives is given through CEO briefings and the frequency of this will be increased. A second exercise to review more recent ideas received is being progressed. In addition, regular finance and savings updates are provided to 'Staff side' at the Trades Union Partnership Forum meetings.</p>	March 2025	V&SB Theme Lead Executive Directors

Ref	Recommendation	Management response	Completion date	Responsible officer (title)
	R2.2 The Health board should put clear arrangements in place to canvass savings and efficiency ideas from service users and other stakeholders	<p>Arrangements to identify opportunities for improvement from patients and stakeholders are based on a range of approaches, including patient involvement in consultations, specific project work (eg Value based healthcare projects) and receiving feedback from Llais. Opportunities to learn from patient compliments and complaints are also taken as part of learning across all services. Patient stories are also used as a mechanism to identify good practice.</p> <p>We are also promoting the Bevan Commission campaign of 'Silly Rules' within the organisation, encouraging service users, stakeholders and staff to identify opportunities, through the review of 'silly rules' to improve, streamline or where appropriate remove steps, requirements or processes. We will review the outcome of this work to see if there are local opportunities.</p>		
R3	The Health Board should ensure that all relevant staff are applying its quality impact assessment approach on savings schemes in a consistent manner.	The ABUHB QIA process was developed and formally signed off by the Board in September 2023, this is the process all savings proposals are required to progress through if they are likely to have a direct impact on provision of patient care. Guidance on the application and criteria for the savings and QIA process has been shared by Planning leads as part of the Annual planning process, additionally the Executive team review savings to ensure the process is appropriately followed.	Completed as part of existing process	Executive Director of Strategy, Planning and Partnerships

Ref	Recommendation	Management response	Completion date	Responsible officer (title)
R4	The Health Board should strengthen its approach to the reporting of cost savings by ensuring that future savings reports to Board and committees articulate all the savings the organisation needs to deliver each year to meet its Welsh Government control total deficit.	<p>The Board has well established best practice mechanisms for transparently reporting the forecast financial and savings position which have been subject to Welsh Government and audit review.</p> <p>Health Board savings reporting is aligned to the guidelines and requirements of the Welsh Government financial management regime.</p> <p>The overall health board expenditure forecast above funded levels, compared with the level of savings planned identifies a shortfall as the Health Board forecast deficit. This is reported against the statutory duty to break even as well as clearly stating the comparison with the control total set by the Welsh Government.</p>	Health Board reporting will continue in current format which is compliant with Welsh Government guidelines and best practice.	Executive Director of Finance
R5	The Health Board should continue to refine and update its medium-term financial plan (route map) to 2026-27 based on internal and external delivery risks and quickly take corrective action where there is slippage in its planned financial trajectory.	<p>The Health Board's 'Route map to recovery' was approved by the Board in July 2024, as part of the Value and Sustainability Board savings identification process and the annual planning process the detailed actions will be further developed.</p> <p>The 2025/26 Planning process will confirm the delivery plan against the route map.</p>	March 2025	Chief Executive Officer and Executive Director of Finance
R6	The Health Board should ensure that its current financial training and capacity building for its budget holders is sufficiently fit for purpose.	The Health Board has several staff education, training, guidelines and development offers to improve financial and business acumen, these are considered as fit for purpose and are regularly revised and added to. Many of these were developed as a result of the Board becoming aware of the	Complete as part of existing process.	Executive Director of Finance/ Executive Director of

Ref	Recommendation	Management response	Completion date	Responsible officer (title)
		<p>need for improvements in some staff budget and business management capabilities.</p> <p>The current portfolio includes:</p> <ul style="list-style-type: none"> • Induction training including Financial Control Procedures • Specific new budget holder finance system training • Specific new budget holder procurement training • Specific electronic staff record training • Budget management e-learning tool • Roster management training • Medical Job planning training • Procurement update training sessions • Contract management FCP awareness training • Counter Fraud training • Clinical Director business training programme (CDx) • Directorate Manager business training programme (DMx) • Business Case content/process guidance • Governance and control self-assessment tools • Value Based Healthcare training programme • Quality Improvement training programme <p>Plus, bespoke or repeat training on request or relevant to business need provided by expert business partners.</p> <p>Additionally, the Board will be examining recruitment processes to ensure financial competencies are adequately tested. We are also working with HEIW to contribute to the development of a framework for management</p>		Workforce and Organisational Development/ Executive Director of Nursing

Ref	Recommendation	Management response	Completion date	Responsible officer (title)
		competencies, of which, financial and business acumen along with budget management will need to feature strongly.		
R7	The Health Board should ensure its performance and accountability framework is working as intended and acting as an appropriate lever to manage divisional and directorate underperformance against savings targets.	<p>The Board has established a performance and accountability framework that operates an assessment of performance that may invoke management escalation arrangements where performance is not as expected. This framework was approved by the Board in September 2023. This specifically includes financial performance measured by budget holder budget variance.</p> <p>Where adverse performance is identified, and triggers are met, the budget holder may be subject to escalation measures. This is discussed by the executive team.</p> <p>Savings delivery performance is an element of this process, however, this is given greater focus as part of divisional assurance reporting and Value and Sustainability Board reporting.</p> <p>The Performance and Accountability arrangements are to be reviewed as part of the 12-month review of the Performance Management Framework.</p>	May 2025	Executive Director of Strategy, Planning and Partnerships
R8	The Health Board and its committees need to ensure that its identified controls and mitigating action for its strategic financial risks are fit for purpose and that their ongoing	<p>As a simple measure of the system effectiveness and delivery of the desired impact the observation is noted, as the Board is reporting a deficit.</p> <p>The Board would appreciate clarity on the assessment of whether the controls established are an issue or whether</p>	Completed – Existing governance mechanisms will continue.	Executive Director of Finance

Ref	Recommendation	Management response	Completion date	Responsible officer (title)
	scrutiny clearly identifies remedial action where these controls are not having the desired impact.	<p>the remedial actions are an issue to enable the appropriate remedial action to be developed.</p> <p>The Board does accept that further savings are achievable and will need to be delivered, however, the Board cannot make savings without reference to the context in which it operates, for example responding to system pressures and achieving government elective care targets, some of which are externally driven beyond the control of the health board eg emergency demand and availability of social care.</p> <p>The safety of patients is the prime objective of the health board.</p> <p>See response to R7 above which refers to a review of our performance accountability framework which forms part of improving delivery.</p>		
R9	The Health Board should continue to strengthen its approach to identifying and developing savings schemes with a view reducing the number of schemes that are rated as red, and to maintain a focus on moving its red and amber schemes to green.	<p>The Health Board has delivered some of the highest value savings across Wales for 2023/24 and expected for 2024/25. The Board will continue to identify opportunities to progress as savings and efficiencies under its current Value and Sustainability Board mechanisms, with further escalation of delivery through delegated budget leads and through the accountability framework arrangements.</p> <p>The route map to recovery will act as a steer for strategic themes along with key programme workstreams.</p> <p>External factors referenced in response to R7 will influence the pace of delivery.</p>	Completed	V&SB theme lead Executive Directors

Ref	Recommendation	Management response	Completion date	Responsible officer (title)
R10	The Health Board should strengthen its current mechanisms for sharing learning on savings schemes to ensure that it gathers and then disseminates learning from schemes that have failed or underdelivered.	The Board has an established mechanism for reporting all saving schemes' status, these reports are shared with all budget holders as part of the Value and Sustainability Board process, and successful and failing schemes are discussed to promote shared learning. Where high value schemes are failing, these are explicitly considered and reviewed further to determine what mitigating action may be possible.	Completed as part of existing process	V&SB theme lead Executive Directors



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