

## Resource Pack 26 - Business Case Template including Options Appraisal

### Purpose of this document

This document summarises the benefits to be delivered by the project and demonstrates that these benefits can be realised through the project as proposed.

The business case will compare expected patient outcomes and financial cost of the current service with that of the revised service, using firm data where available and making clear assumptions where data is not available.

**Senior Responsible Officer:**

**Service Development Lead:**

**Clinical Lead:**

### Document Control

#### Versions

Date	Version	Section (s) Affected	Description of Change

### Approvals

Date	Version	Name	Title	Organisation

### Strategic Fit

**Project aligned to (Evidence of National & Local Fit)**

IMTP \_\_\_\_\_ 7 Pillars \_\_\_\_\_ Foundations 4 Change \_\_\_\_\_ Other \_\_\_\_\_

#### Existing Arrangements

Please specify the current service in place

#### Strategic Risks

Outline the risks of continuing with this service, consider:

Patient Experience  
Quality & Safety  
Service Sustainability  
Service Demand  
Finance

**Equality Impact Assessment**

Please refer to Health Board guidance

**Options Appraisal - Option One**

**Proposal**

Provide an outline of the option including:  
How will the new service be delivered  
By whom and what clinical / service expertise they have  
When will the service operate  
What is the volume of delivery and how does this match demand  
Please include as appendices any technical documentation / evidence / service specification / flow charts.

**Risks**

Outline the risks of continuing with this service, consider:

**Patient Experience**  
**Quality & Safety**  
**Service Sustainability**  
**Finance**

**Benefits**

**Clinical Benefits:**  
**Patient Benefits:**  
**Staff Benefits:**  
**Financial Benefits:**

**Capital Costs**

Outline any capital costs including all IT hardware, estates, or equipment over £5k

**Non-Recurrent Costs**

Outline all initial start up costs to commence the service

**Recurrent Costs**

Outline all on-going running costs including any changes over time anticipated

	Year 1	Year 2	Year 3	Year 4	Year 5
Recurrent Costs					

**Savings**

If you anticipate that the service will make savings elsewhere these need to be identified and quantified. An explanation will be needed for any evidence to support this.

	Year 1	Year 2	Year 3	Year 4	Year 5
Savings					

**Transfer in Funding**

Please quantify the exact funding required for the delivery of the service.

	Year 1	Year 2	Year 3	Year 4	Year 5
Capital Costs					
Non-recurrent costs					
Resurrent costs					
Savings					
<b>Balance</b>					

**Opportunity for Innovation**

Identify anything that is particularly innovative or new about the service.

**Option Appraisal - Option Two**

**Proposal**

Provide an outline of the option including:

How will the new service be delivered

By whom and what clinical / service expertise they have

When will the service operate

What is the volume of delivery and how does this match demand

Please include as appendices any technical documentation / evidence / service specification / flow charts.

**Risks**

Outline the risks of continuing with this service, consider:

**Patient Experience**

**Quality & Safety**

**Service Sustainability**

**Finance**

<b>Benefit</b>					
<b>Clinical Benefits</b> <b>Patient Benefits</b> <b>Staff Benefits</b> <b>Financial Benefits</b>					
<b>Capital Costs</b>					
Outline any capital costs including all IT hardware, estates, or equipment over £5k					
<b>Non-Recurrent Costs</b>					
Outline all initial start up costs to commence the service					
<b>Recurrent Costs</b>					
Outline all on-going running costs including any changes over time anticipated					
	Year 1	Year 2	Year 3	Year 4	Year 5
Recurrent Costs					
<b>Savings</b>					
If you anticipate that the service will make savings elsewhere these need to be identified and quantified. An explanation will be needed for any evidence to support this.					
	Year 1	Year 2	Year 3	Year 4	Year 5
Savings					
<b>Transfer of Funding</b>					
Please quantify the exact funding required for the delivery of the service.					
	Year 1	Year 2	Year 3	Year 4	Year 5
Capital Costs					
Non-recurrent costs					
Recurrent costs					
Savings					
<b>Balance</b>					
<b>Opportunity for Innovation</b>					
Identify anything that is particularly innovative or new about the service.					

Please add in as many options as appropriate following the same format. There should be at least 2 options – Preferred Option & Do Nothing

<b>Preferred Option</b>
Please state which of the options outlined above is your recommendation and why.

The following is based upon the preferred option:

**Procurement / Commissioning**

<b>Procurement Strategy</b>
Please specify how you will procure / commission the service and what procurement advice you have received
<b>Risk Transfer</b>
Please identify any risks inherent in the transfer of the service and how you will mitigate these.
<b>Contract Length</b>
Please state if this is an on-going service change or a pilot / project
<b>Workforce &amp; Personal Development (inc. TUPE &amp; Pension)</b>
Please identify any HR issues – take HR advice on this prior to submission

**Project Management**

<b>Project Manager Time</b>			
Identify how the project will be managed during the development, implementation and delivery phase. Also identify any project management support needed for evaluation and reporting.			
<b>Completion Schedule</b>			
Outline the timeline for implementation of the project			
<b>Contingency Plan</b>			
Please identify any contingencies identified to mitigate risks outlined in your preferred option appraisal.			
<b>Evaluation of Service</b>			
How will the service be evaluated and which group will this be reported to.			
<b>Evaluation of Benefit</b>	<b>Performance Indicator</b>	<b>Method of Measurement</b>	<b>Frequency of Measurement</b>
Clinical			
Patient Experience			
Finance			
Othe (Specify)			

<b>Summary of Project Objectives</b>
<b>Achievement of expected benefits</b>
Refer to the benefits outlines in the proposal or business case approved submission
<b>Financial Costs &amp; Benefits</b>
Cost of the scheme
Benefits of the scheme
<b>Unexpected benefits</b>
<b>Unexpected problems</b>
<b>Patient Engagement</b>
<b>Recommendations for Action</b>