NHS Harrow: Impact assessment tool for service change proposals

Appendix 2: Voluntary Sector Commissioning Review Impact Assessment

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1. Completing the impact assessment tool

This framework is intended for use for individual proposals for changes to services. It is anticipated that a range of stakeholders and specialists will need to work together to complete this assessment while developing individual service proposals. This framework does not replace requirements to undertake an equality impact assessment or regulatory impact assessment where necessary.

2. Using the results of the assessment

Impact assessments on all current projects should be reviewed by the relevant Transformation Programme Management Board:

- a. If a proposal receives a 'Red' flag indicating that a high risk of harm exists the proposal should be reviewed urgently by the Transformation Programme Board and either ceased or redesigned appropriately.
- b. If a proposal receives one or more 'Red' flags in any other criteria then the relevant Transformation Board should review the proposal. One red flag is not necessarily a cause of concern; for example a service redesign project on a low prevalence condition may still be worthwhile if other benefits are anticipated. Each case will need to be considered individually to ensure that enough significant benefits (e.g. 'green flags') are predicted to accrue from the project.

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Criteria	Red Flag	Amber Flag	Green Flag
SAFETY			
Harm	High risk of harm	Medium risk of harm	Low risk of harm 🔀
Quality improvement	No quality improvement	Moderate quality improvement 🔀	High quality improvement
EFFECTIVENESS			
Strength of evidence for stated clinical objectives	Limited evidence	Modest evidence	Good evidence
COST			
Value for money	Limited evidence of vfm or evidence of poor vfm	Evidence of modest vfm	Evidence of good vfm 🛛
Impact on current resource utilisation / PCT financial balance	Low impact)	Moderate impact 📃	Significant impact 🔀
BENEFITS			
To individual (health improvement, patient outcome & life expectancy)	No benefits	Modest benefits	High benefits 🔀
To community (health inequalities)	No benefits	Modest benefits	High benefits 🔀
NEED			
Prevalence	<0.1% prevalence	0.1-10% prevalence	>10% prevalence 🔀
PATIENT ACCESS AND EXPERIENCE			
Patient & public access	Reduces access (including compromising national access targets	Maintains access	Improves access 🛛
Patient experience	Reduces patient experience	Maintains patient experience	Improves patient experience 🛛
Carer experience	Reduces carer experience	Maintains carer experience 📃	Improves carer experience 🛛
OTHER CRITERIA			
Impact on partners' sustainability	Has high impact on partners' sustainability	Has modest impact on partners' sustainability	Has no, or beneficial impact, on partners' sustainability
Partners' acceptability	Low acceptability	Moderate acceptability 🔀	High acceptability
Treatment or service options	Other options with better outcomes	Other options with same outcomes	No other options 🔀
Feasibility	Unsustainable or significant risk of failure	Probably sustainable, implementation feasible	Sustainable, easily integrated. Clear implementation plan
POLICY ALIGNMENT			
National policy, target or other statutory requirement – (PCT Commissioning Strategic Plan)	Not related to national policy or target	Weak relationship to national policy or target	Direct relationship to national policy or target