

HOW TO WRITE A BUSINESS CASE FOR THE NHS.



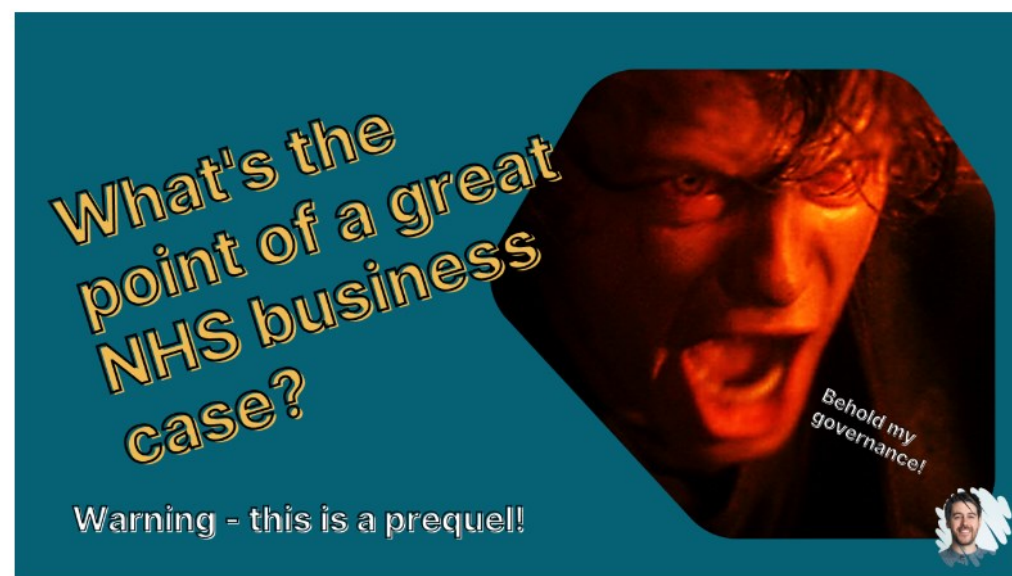
**A Masterclass for
HealthTech Companies.**

The following carousel has been adapted from these 3 articles.



Seven tips on writing a great business case for the NHS.

How to structure a great business case for the NHS



What's the point of a great business case for the NHS? A prequel...

“For most HealthTech companies a versatile and solid business case is **one of the most important assets** you need to have when engaging with the NHS.

If you're looking to be **commissioned by a local area or a large provider** then at some point you'll need one.

It can also be a very useful asset to help contextualise and qualify your offering in a way that **fits into their sphere of thinking.**”

LIAM CAHILL

Founder at Together Digital



SO, WHAT EXACTLY IS A BUSINESS CASE?

In most NHS organisations, they will have to make decisions about **where to apply their energy** and their **different pots of monies** in accordance with their business objectives.

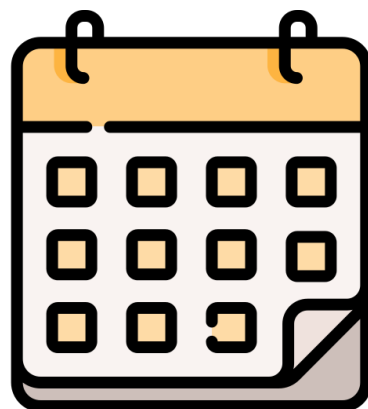
Generally a business case is a document asking for **cold hard cash**, but also different forms of contributions:

- . It might be **one off spends**,
- . Asking for a **new job role**,
- . A plan to **invest a lot of time** into a specific initiative.

WHEN DO YOU HAVE TO WRITE THEM?

The NHS likes a business case, so more often than not if you're going to get approved for pilot or purchase, especially in this financial climate, then there will probably be a business case involved.

Usually a load will go through **at certain times of year** and they'll have annual meeting patterns to accommodate this, but it can happen all year.



WHO DO YOU SUBMIT THEM TO?

Depending on the size of the thing being proposed it may go to the executive, some cases **may need board approval** (or a sub committee) depending on their terms of reference.

**So bigger cost or risk or bolder ask =
more senior group.**

Smaller asks might have a specific process which **might be quicker or easier.**



Structure of a business case.



IN A NUTSHELL

This structure has been put together to provide useful information to support the submission of internal business cases **in accordance with NHS best practice** around business case submission and content.

Title.

Executive Summary. (Written last.)

Strategic Objectives, Background and Context.

The case for change.

Proposed solution, and alternative options.

Economic and Financial Considerations.

Project Management, Delivery and Risk Mitigation.

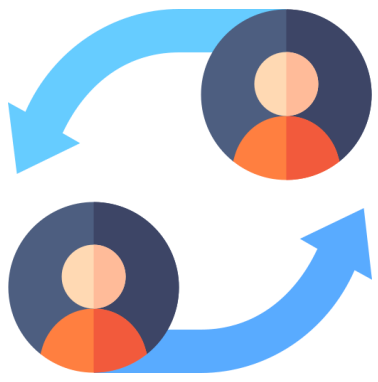
Recommendation



STRATEGIC OBJECTIVES, BACKGROUND AND CONTEXT

What this section should contain:

- 1. The strategic context and direction of travel - national, local and provider.**
- 2. What the local provider is doing or has done or will have done and the inherent limitations of this.**
- 3. Short summary appraisal of the status quo - in order to setup the characteristics of the proposed solution (bridge anchor).**
- 4. An explanation that resulting from the above they have worked with other stakeholders and concluded X,Y,Z.**



THE CASE FOR CHANGE

“The Creamy Bit of the Business case.”

What this section should contain:

1. **A concise transition to the strategic point** of a more pragmatic action or series of actions.

(“Based on the priorities we have identified we're proposing to...”)

2. **An outline of the components of the solution.**

(Think about their view of what needs to be done in its entirety)

3. **The proposed benefit from a strategic view.**

(“these factors will allow us to {insert benefit here}”.)



PROPOSED SOLUTION, AND ALTERNATIVE OPTIONS

What this section should contain:

1. A general outline that there are a range of suppliers who may fulfil all or some parts of the criteria (if that's true) and state the process.

If you are the preferred solution.

2. Detail succinctly how you fit the criteria, and use appendices to add content IN YOUR LANGUAGE to quote from or refer to.

3. Don't be zealous and make it a sales pitch, and don't keep saying the name. Name yourself once and refer to yourself as the supplier.



ECONOMIC AND FINANCIAL CONSIDERATIONS

What this section should contain:

Spend profile

- **Breakdown of costs including capital and revenue breakdown.** I love a cost calculator to support this.
- **Try and take a 2-3 year view on ongoing costs,** depending on contract length. Illustrate a year by year profile so it's clear.
- **Although if there are other internal costs then don't make it difficult for them to add that in.**



ECONOMIC AND FINANCIAL CONSIDERATIONS

Return profile

- **Cash release** - we save £x money on mileage costs because we can do it virtually (for example).
- **Non-releasing cashable** - we free up 50% of a WTE nurse practitioner = £X with on cost pa. It's not cash back but it is value.
- **Spend avoidance** - we're slammed and might have further costs but reducing the list will do X.
- **Risk avoidance** (if there are costs associated with risk)
- **Outcomes** - e.g. we expect that it will reduce admissions by 5% which = £5,000 per day x 5 days x (5% of 400 patients) etc.



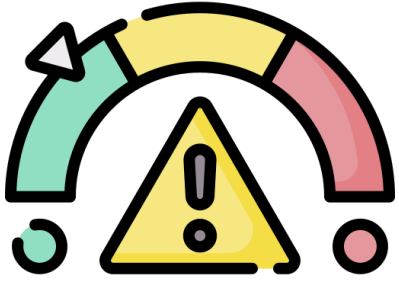
PROJECT MANAGEMENT, DELIVERY AND RISK MITIGATION

What this section should contain:

- **What will the onboarding and initiation process be, include when would it likely start and when would it be operational.**
- **What will the supplier provide as support - during setup and business as usual - and what internal resource and activities will we need.**

(If there are lots needed then put a note for them to add this in unless you have a recommendation or good idea.)

- **Timescales** - especially if this has different stages of transformation etc.



PROJECT MANAGEMENT, DELIVERY AND RISK MITIGATION

Risk Identification and Mitigation.

- **A more detailed, even joint appendix on this, and pulling in different categories of risk - provider risk, clinical risk, etc.**
- **If you're a digital solution a DCB1029 and DCB0160, or reference to them is good here.**
- **Strategic risks, or any that key stakeholder might use as objection points or potential tricky questions - really do go to town on this section, whilst keeping it accessible and short.**



RECOMMENDATION

What this section should contain:

Here you need to really put down **a summary of the form of recommendations** that you're seeking approval for.

For example,

This case seeks approval for the following recommendations:

- . Strategic prioritisation of X, Y & Z
- . Budget of £x over x period to address this
- . Support for the preferred supplier [you yay!] starting from [when?]



EXECUTIVE SUMMARY

Go back to the top and take everything you've written, and summarise it, **without saying anything new**. A template may be:

- **This business case seeks approval for** [cost] over [period] to support [stuff] + that allows us to do [strategic priorities] detailed below.
- **This should allow us to achieve** [financial + non financial - e.g. clinical - benefits] and to [anything else significant], in alignment with [local priority, stated need and national priorities]
- Centre and list the **strategic priority** here (my preference).
- **The cost of this** [detail in summary]
- **To support this case**, and our recommendations, we have also detailed our options appraisal, and aspects relating to project management, delivery, compliance and risk mitigation.

“

**And that my
friends, is a
business case
structure.**

To learn more about really writing an **awesome business case**, do have a read of this article!



The busy business case conveyor belt made quality checking a chore (free tongue twisters R Us)

Seven tips on writing a great business case for the NHS.

**Hope you found
this helpful!**



**This is a series we are making to help
HealthTech Innovators access better
resources.**

Just our small way of helping!