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| Proposed NP Model of Care | | | |
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| Area of Practice | | | |
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| [Executive](#Rational) Project Sponsor | | | |
| I have reviewed and support the business case for: [proposed model]  I consider the assumptions underpinning the business case are appropriate and achievable. | | | |
| **Name:** | **Position:** | **Signature:** | **Date:** |
|  |  |  | Click here to enter a date. |
|  | | | |
| Financial Services | | | |
| I have reviewed and support the business case for: [proposed model]  I consider the assumptions underpinning the business case are appropriate and achievable. | | | |
| **Name:** | **Position:** | **Signature:** | **Date:** |
|  |  |  | Click here to enter a date. |
|  | | | |
| Approval | | | |
| Approved | | Not Approved | |
| **Name:** | **Position:** | **Signature:** | **Date:** |
|  |  |  | Click here to enter a date. |
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| 1. [Executive Summary](#ExecSumm" \o "Provide a high level overview of the project) | | | |
| Please provide a high level overview of the proposed nurse practitioner model of care (the model) highlighting:   * Background, purpose, objective and drivers * Nature of the project, i.e. does it involve capital acquisition or recurrent expenditure. * Financial Implications * Alignment with [Health Service/Organisation] Strategic Plan * Impact or benefits to the areas Business Plan * Major benefits and risks * Any legal or commercial implications | | | |
| 1. [Source](#ExecSumm) of Funding | | | |
| Please select the source of funding for this model:  Choose an item. | | | |
| If “Other”, what is the alternative source of funding? | | | |
| 1. Strategy and Planning | | | |
| 1. Detail the relationship of this model to the current Strategic Plan.   **Select**  Details:   1. Detail the impact of the model on the [Health Service/Organisation] recurrent budget, in particular any impact on the current financial year budget. 2. Does this model have an impact on the Budget Savings Initiative Plan? | | | |

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| 1. [Financial Summary](#Finance" \o "To be completed by Business Manager) |
| Please provide a summary of the financial implications associated with implementing this model.  This summary should include:   1. Salary and salary on-costs; 2. Estimates of leave time for NPC and NP when endorsed; 3. Costs associated with backfill for NPC and NP; 4. Estimates of costs for clinical supervision and mentoring; 5. Arrangements for professional indemnity insurance; 6. Cost of infrastructure and consumables required for delivering services specified under the model of care. |
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| 1. Detailed Project Analysis |
| 1. Background and purpose   Provide all relevant background information to support the proposed model. Include the current situation and the need for the model in [relation to the affected elements of the business](#Elements" \o "Elements include:  activity, finance, clinical, safety and quality of care.).   1. Assumptions, Dependencies & Constraints   List any internal and external assumptions, dependencies or constraints that may impact the models’ outcomes and how these matters will be addressed.   1. Critical success Factors   Identify the critical success factors in relation to price, quality, service and change management.   1. Synergies   Provide details of any potential benefits, not reflected in the business case that may accrue to other areas within your site/program or to other sites/programs as a result of the successful implementation of the model.   1. Patient Impact   Describe the impact of the model on patient safety and quality of care. Include any relevant research relating to evidence based care.   1. Project Governance including Monitoring and Reporting   Detail how the model will be managed and through what forum steering committee(s) will progress be reported. Include how accountabilities will be addressed.   1. Project Implementation Plan   A high level implementation plan that should include:   * Expected timeframe. * Resources required, from your program/site and other organisational programs/sites. * When you would expect to realise benefits from the model. * Implementation risks. |
| 1. Financial Modelling and Analysis |
| 1. Financial Key Activity Assumptions  * Current Activity Levels   Information on the current levels of activity/services underpinning the business case   * Forecast Activity Levels   Information on the expected growth in current levels of activity/services   1. Financial Modelling   Results from the financial modelling as per Attachments A, B and C.   * Sensitivity Analysis   Detail the factors that will have the greatest impact on the financial viability of the model and modelling of these factors.   * Measurement of Financial Benefits   How the model will be measured on an ongoing basis.   1. Source of Funding   Identify the source of funding for the project; broken into initial project costs and ongoing costs.   |  |  | | --- | --- | | Costs | Source of Funding | | Project Costs |  | | Recurring Costs |  | |

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| 1. Project Delivery Schedule |
| |  |  | | --- | --- | | Phase | Date | |  | Click here to enter a date. | |  | Click here to enter a date. | |  | Click here to enter a date. | |  | Click here to enter a date. | |  | Click here to enter a date. | |  | Click here to enter a date. | |  | Click here to enter a date. | |  | Click here to enter a date. | |  | Click here to enter a date. | |
| 1. Suggested Attachments |
| 1. Attachment A – Summary of Financial Evaluation 2. Attachment B – Cash Flow Analysis 3. Attachment C – Operating Performance 4. Attachment D – Other Supporting Documentation   Any other documentation considered relevant to the project submission. |