Rutland If you would prefer to provide aggregated figures for the savings (columns F-J), for a group of schemes related to one benefit type (e.g. delayed transfers of care), rather than fillin in figures against each of your individual schemes, then you may do so. If so, please do this as a separate row entitled "Aggregated benefit of schemes for X", completing columns D, F, G, I and J for that row. But please make sure you do not enter values against both the individual schemes you have listed, and the "aggregated benefit" line. This is to avoid double counting the benefits.										
										Values against both the individual schemes you have insted, and the aggregated benefit line. This is to avoid double counting the benefits. However, if the aggregated benefits fall to different organisations (e.g. some to the CCG and some to the local authority) then you will need to provide one row for the aggregated benefits to each type of organisation (identifying the type of organisation in column D) with values entered in columns F-J.
2014/15		the type of organ	isation in colu	umn D) with v	alues entered	i in columns	F-J.]		
Please complete white cells (for as many row	s as required):									
Benefit achieved from	Scheme Name	Organisation to Benefit	Area of spend to benefit	Change in activity measure	Unit Price (£)	Total (Saving) (£)	How was the saving value calculated?	How will the savings against plan be monitored		
	Aggregated benfit of schemes UP1, UP2, UP3,		Community				Assumption 1 - £483 per week average gross weekly expenditure for residential and nursing care (or older people (over 65) Assumption 2 - 52 weeks in year. Assumption 3 - Assuming that the readmission could happen at any point in the year, on average it will happen at the mid point, therefore we divide the annual			
Reduction in permanent residential admissions	LTC1, LTC2	Local Authority	Health	(4)	12,558	(50,232)	figure by 2. Assumption 1 - Older people who are not able to stay at home during their 91 days, on average, leave half way during the period i.e. after 40.5 days. Assumption 2 - The breakdown of patients not at home after 91 days is as follows: (a) 40% are admitted to hospital (average cost of £1.489 per day as per metric 4) (b) 30% are admitted to residential care (average cost £69 per day) and	CSU Admissions Data Collatio		
ncreased effectiveness of reablement	Aggregated benefit of schemes UP2, UP3, HDR2	NHS Provider	Acute	(1)	19,209	(19,209)	30% pass away (with no resulting cost) Assumption 1 - Older people who are not able to stay at home during their 91 days, on average, leave half way during the period i.e. after 40.5 days. Assumption 2 - The breakdown of patients not at home after 91 days is as follows: (a) 40% are admitted to hospital (average cost of £1,489 per day as per metric 4) (b) 30%	Data Collation		
ncreased effectiveness of reablement	Aggregated benefit of schemes UP2, UP3, HDR2	Local Authority	Community Health	(1)	19,209	(19,209)	are admitted to residential care (average cost £69 per day) and 30% pass away (with no resulting cost) Assumption 1 - Delayed Transfers of Care are advised to be	Rutland Local Reablement Data Collation		
Reduction in delayed transfers of care	Aggregated benefit of schemes UP1, HDR1	NHS Provider	Acute	(115)	200	(23,000)	approximately £200 - this assumption will be further verified and refined.	CSU DTOC Data Collation		
Reduction in non-elective (general + acute only)	Aggregated benefit of schemes UP1, UP2, UP3, UP4, IUR1, IUR2, LTC1, LTC2 Aggregated benefit of schemes UP1, UP2, UP3,	NHS Provider	Acute	(16)	1,489	(23,824)	National average cost of a non-elective inpatient short and long stay combined excluding excess bed days is £1,489 National average cost of a non-elective inpatient short and long	CSU NEL Data Collation		
Reduction in non-elective (general + acute only)	HDR2	NHS Provider	Acute	(9)	1,489	(13,401)	stay combined excluding excess bed days is £1,489	CSU NEL Data Collation		
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otal						(148,875)				

2015/16

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Benefit achieved from	Scheme Name	Organisation to Benefit	Area of spend to benefit	Change in activity measure	Unit Price (£)	Total (Saving) (£)	How was the saving value calculated?	How will the savings against plan be monitored?
Reduction in permanent residential admissions	Aggregated benfit of schemes UP1, UP2, UP3, LTC1, LTC2	Local Authority	Community Health	(8)	12,558	(100,464)	Assumption 1 - £483 per week average gross week/y expenditure for residential and nursing care for older people (over 65) Assumption 2 - 52 weeks in year. Assumption 3 - Assuming that the readmission could happen at any point in the year, on average it will happen at the mid point, therefore we divide the annual figure by 2.	CSU Admissions Data Collation
			Ticau				Assumption 1 - Older people who are not able to stay at home during their 91 days, on average, leave half way during the period i.e. after 40.5 days. Assumption 2 - The breakdown of patients not at home after 91 days is as follows: (a) 40% are admitted to hospital (average cost of £1,489 per day as per metric 4) (b) 30% are admitted to residential care (average cost £69 per day) and	Rutland Local Reablement
Increased effectiveness of reablement	Aggregated benefit of schemes UP2, UP3, HDR2	NHS Provider	Acute	(1)	19,209	(19,209)	30% pass away (with no resulting cost) Assumption 1 - Older people who are not able to stay at home during their 91 days, on average, leave half way during the period i.e. after 40.5 days. Assumption 2 - The breakdown of patients not at home after 91 days is as follows: (a) 40% are admitted to hospital (average cost of £1,489 per day as per metric 4) (b) 30% are admitted to residential care (average cost £69 per day) and	Data Collation
Increased effectiveness of reablement	Aggregated benefit of schemes UP2, UP3, HDR2	Local Authority	Health	(2)	19,209	(38,418)	30% pass away (with no resulting cost) Assumption 1 - Delayed Transfers of Care are advised to be	Data Collation
Reduction in delayed transfers of care	Aggregated benefit of schemes UP1, HDR1	NHS Provider	Acute	(346)	200	(69,200)	approximately £200 - this assumption will be further verified and refined.	CSU DTOC Data Collation
Reduction in non-elective (general + acute only)	Aggregated benefit of schemes UP1, UP2, UP3, UP4, IUR1, IUR2, LTC1, LTC2	NHS Provider	Acute	(70)	1,489	(104,230)	National average cost of a non-elective inpatient short and long stay combined excluding excess bed days is £1,489	CSU NEL Data Collation
Reduction in non-elective (general + acute only)	Aggregated benefit of schemes UP1, UP2, UP3, HDR2	NHS Provider	Acute	(12)	1,489	(17,868)	National average cost of a non-elective inpatient short and long stay combined excluding excess bed days is £1,489	CSU NEL Data Collation
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Total						(349,389)		