Impact, Cost-Effectiveness and Cost-Saving Dashboard

IRIS

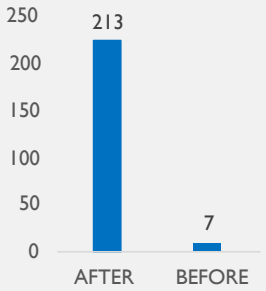
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IMPACT ON Swansea Bay

IRIS

REFERRALS

DV referrals from GP practices: before and after IRIS



THERAPEUTIC SUPPORT

69

clients engaged with therapeutic / counselling support offered

SUPPORT

55

Clients not known specialist support services to the service prior to IRIS referral

MARAC REFERRAL

7

Direct referrals to the multi agency risk assessment conference

SOCIAL CARE

4

Direct referrals to adult social care

CASE STATUS

175

cases closed

Current status as of March 2024

TIMELINE

24h / 48h

Avg. time to respond to referrals

QUALITY OF LIFE

8%

Increase in Quality Adjusted Life Years (QALY)

IRIS

Cost-Effectiveness Analysis (CEA) Results

NET MONETARY BENEFIT £13.55

Is the net monetary benefit of the IRIS Programme from an NHS perspective

SOCIETAL SAVINGS £20.64

*not all savings will be cashable

Per woman aged 16+ registered at GP practices per year

SOCIETAL SAVINGS £6.8M

*not all savings will be cashable

Across all IRIS covered area in Swansea Bay in 3 years

COST £1.07

Is the cost per woman per year of the IRIS Programme from an NHS perspective

TAXPAYER SAVINGS £17.45

*not all savings will be cashable

Per woman aged 16+ registered at GP practices per year

VALUE FOR MONEY 15.4x

Better value for money than the flu jab recommended by NICE, from a **societal** perspective

COST EFFECTIVENESS £1,460 per QALY gained

The IRIS Programme is highly cost-effective from an NHS perspective

TAXPAYER SAVINGS £70.8k

*not all savings will be cashable

Per IRIS trained GP practice per year

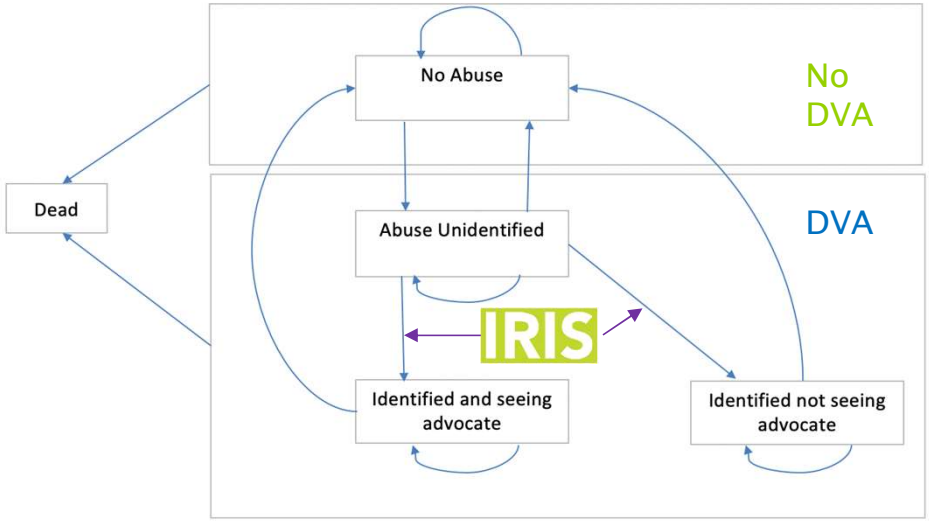
4.5x

Better value for money than the flu jab recommended by NICE, from a **NHS** perspective

Cost-Effectiveness Analysis Modelling and NICE guidelines

The results presented here were obtained using the CEA tool provided by IRISi, which is based on a full economic evaluation model published on the BMJ Open (Barbosa el at, 2018).
The Home Office 'The economic and social costs of domestic abuse' Report used for updated cost figures (Oliver et al, 2019). All costs updated to 2023£.

MARKOV MODEL



NICE
National Institute for Health and Care Excellence

££/QALY<£20,000 per capita: good value for money

££/QALY= £30,000 per capita: needs additional factors to justify implementation

££/QALY>£30,000 per capita: not recommended for implementation. If acceptable, justification needs to be increasingly strong

NICE is the institution in the UK responsible for guidance around interventions to be implemented in health care settings.

Since 2013, NICE recommends the adoption of interventions that cost less than £20,000 per QALY gained.

Interventions above this threshold are not recommended for implementation at population level.