Integrated care modelling tool version 2 support update

Key changes include:

**Assumptions**
- Updates to the impact assumption tab to clarify which pieces of information / evidence have been used from the value cases and how this data has been used to drive the outputs from the calculator
- The assumptions clearly indicate that the calculator is about quantifying the potential total benefit, and that the timescale will depend on local variables

**Activity data**
- The calculator was pre-populated with publically available activity data, which in the original beta included all NEL admissions, rather than only emergency admissions, and as such was likely to overstate potential for activity reduction. This has now been amended to specify Emergency Admission (codes 21-28).

**Population in scope**
- The population for NWL has been amended to >65s as this more closely reflects the target population cohort for the ICP which was >65s and diabetes
- Isle of Wight population focus has been amended to > 65s as this reflect more closely the target population cohort for My Life a Full Life (programme focuses on people with long term conditions, older people and those with mental health needs). This has no material impact on the calculator as it is not currently one of the options listed on the drop down menu (quantified impact not yet available).
- Manchester population focus has been amended to all adults as Manchester are using a risk stratification approach to select appropriate people from their whole population
- Northamptonshire population has been amended to >65s for consistency (was previously >75s, but this is not an option in our calculator)

**Changes to evidence**
- Some evidence from Northamptonshire has been removed and the calculator updated accordingly, as these pieces of information were only available in an early draft of the value case and have since been removed
- Additional evidence for Greenwich has been incorporated into the calculator (7% reduction in admission to care homes per annum = 7% reduction in admissions to residential care)