

Urgent Care CQUIN 2015/16	
Indicator number	
Indicator name	Clinical Utilisation Review
Indicator weighting (% of CQUIN scheme available)	
Description of indicator	<p>Clinical Utilisation Review (CUR) is a rigorous approach to ensuring safe and effective care. It is based on the application of objective clinical criteria and designed to ensure that appropriate care is delivered across the health continuum. The CUR demonstrates whether or not patients are clinically appropriate for the level of care they are receiving or bed they are occupying. It identifies the reasons for each barrier and collects evidence such as service delays or issues with capacity.</p> <p>CUR's work alongside existing IT systems and can drive daily rounds or can be used to support clinical decisions when required.</p> <p>It is proposed that CUR is used to evaluate care within Acute inpatient settings and will be used on Ward 2, Mary Seacole (Female) and Magnolia ward (Male)_at the Oleaster site.</p>
To facilitate	<ul style="list-style-type: none"> • Inpatient care is directed at those most in need • Length of stay is appropriate to need • Service capacity is provided in relation to need
Denominator	<p>Reports to include</p> <ul style="list-style-type: none"> • Number of inappropriate admissions • Number of bed days post suitability for discharge • Discharge to information ie patient flow • Barriers to patient flow across acute inpatient services identified • Identified gaps in service provision
Rationale for inclusion	<ul style="list-style-type: none"> • Use of CUR to identify if patients should be sited within the 2 acute wards • Use of CUR to identify patients appropriate for admission to 2 acute wards • The use of CUR to support decision making for discharge from 2 acute wards
Data source	Provider

Frequency of data collection	Monthly
Organisation responsible for data collection	BSMHFT
Frequency of reporting to commissioner	Monthly
Baseline period/date	
Baseline value	
Final indicator period/date (on which payment is based)	
Final indicator value (payment threshold)	
Final indicator reporting date	2015/16
Are there rules for any agreed in-year milestones that result in payment?	
Are there any rules for partial achievement of the indicator at the final indicator period/date?	

Milestones

Date/period milestone relates to	Rules for achievement of milestones (including evidence to be supplied to commissioner)	Date milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Quarter 1	<p>Apply CUR Tool to define clinical criteria specific to service settings to determine:</p> <ul style="list-style-type: none"> • Agreed clinical criteria for admittance to Acute inpatient service this one is admission • Defined clinical specification for level of care within Acute inpatient service Agreed clinical discharge policy for Acute inpatient service • Audit of 100% of Acute inpatients on specified wards to determine if patients are appropriately placed and establish baseline <p>Report detailing above with outcomes and proposed actions end of June</p>		

Date/period milestone relates to	Rules for achievement of milestones (including evidence to be supplied to commissioner)	Date milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Quarter 2	<ul style="list-style-type: none"> Monthly reporting of patients numbers against above June 15 – March 16 		
Quarter 3	<ul style="list-style-type: none"> Action plan to address difference between planned level of provision against delivery Capacity requirements for Acute inpatient service identified for these wards Gaps in service provision identified 		
Quarter 4	<ul style="list-style-type: none"> Plan in place to deliver Acute inpatient service against specification Plan in place to plan capacity requirements for Acute inpatient service 		

Rules for partial achievement at final indicator period/date

Final indicator value for the partial achievement threshold	% of CQUIN scheme available for meeting final indicator value