

### 3. Clinical Utilisation Review (CUR) Tool

Indicator	
<b>Indicator name</b>	Clinical Utilisation Review (CUR)Tool
<b>Indicator weighting (% of CQUIN scheme available)</b>	0.40%
<b>Description of indicator</b>	<p>Pull down from the national framework and then implement a Clinical Utilisation Review Tool (CUR) to review patient's clinical appropriateness 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 is a rigorous, standardised 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 in the right place across the health continuum. The CUR demonstrates whether or not patients are clinically qualified for the appropriate 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 all Trusts within Birmingham inpatient and outpatient settings.</p> <p>Additional funding will be agreed with the Trust to provide internal resource for supporting the CUR implementation; this will be in addition to the CQUIN monies. The Better Care 05 Team will also provide project support from a dedicated mobilisation project team.</p>
<b>Numerator</b>	N/A
<b>Denominator</b>	N/A
<b>Rationale for inclusion</b>	<p>The Clinical Utilisation Review (CUR) tool for cross organisational benefit in the health and social care economy as a key system enabler towards implementation of the five year Sustainability and Transformation Plan (STP) as referenced within the Five Year Forward View: NHS Planning Guidance: 2016/17 – 2020/21.</p> <p>To adopt a Birmingham wide system approach through the use of a CUR tool to identify the right care is delivered in the right place at all times</p> <p>To improve patient flow through the Health and Social Systems by a system wide collaborative approach to addressing the capacity and demand issues highlighted.</p>
<b>Data source</b>	Provider
<b>Frequency of data collection</b>	Daily data feed collection using the agreed template aggregated on a daily basis and reported monthly
<b>Organisation responsible for data collection</b>	Trust
<b>Frequency of reporting to commissioner</b>	Monthly (as above)
<b>Baseline period/date</b>	Not applicable

<b>Indicator</b>	
<b>Baseline value</b>	Not applicable
<b>Final indicator period/date (on which payment is based)</b>	April 2016 – March 2017
<b>Final indicator value (payment threshold)</b>	
<b>Final indicator reporting date</b>	May 2017
<b>Are there rules for any agreed in-year milestones that result in payment?</b>	Yes- see below
<b>Are there any rules for partial achievement of the indicator at the final indicator period/date?</b>	Yes, see below Q2, Q3 and Q4 are reliant on the full delivery of Q1 milestones. Full outcome benefits to improve patient flow from Q2 will be impacted if Q1 outcomes are not achieved Trusts will not be penalised if they can demonstrate that delivery is due to interdependent delays beyond their control



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)
	<p>addressing the emerging Trust specific issues identified in the CUR reports from Q2</p> <p>Report to the commissioners the emerging external specific issues identified in the CUR reports from Q2</p>		
<b>Quarter 4</b>	<p>Provide 2 reports monthly in the standard templates provided :</p> <ol style="list-style-type: none"> <li>1) Daily reporting (aggregated monthly). as agreed with NHSE for those specialist beds presently covered by National CQUIN.</li> <li>2) All beds</li> </ol> <p>Formulate and provide action plans for addressing the emerging Trust specific issues identified in the CUR reports from Q3</p> <p>Report to the commissioners the emerging external specific issues identified in the CUR reports from Q3</p>	30 April 2017	70%