Launch of the National Clinical Utilisation Review Framework

Guide for Clinical Commissioning Groups
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The National Health Service Commissioning Board was established on 1 October 2012 as an executive non-departmental public body. Since 1 April 2013, the National Health Service Commissioning Board has used the name NHS England for operational purposes.
1 Background

Clinical Utilisation Review (CUR) was adopted as national NHS policy in 2006. It is a process that enables both commissioning and provider organisations to make objective, evidence-based assessments of whether patients are receiving the right levels of care in the right settings at the right time.

NHS England is now building on this track record by leveraging the benefit of real-time CUR in provider trusts delivering specialised services. To give prominence to this project, a mandatory CUR CQUIN has been developed for Specialised Providers, of material value contracts, to effectively deliver the CUR Programme from 2015/16.

In recognition of the benefits to be gained by applying CUR to non-specialised providers, and in enabling system-wide improvements to be made across patient pathways, a Clinical Commissioning Group (CCG) CQUIN for CUR was also made available in the 2015/16 non-specialised CQUIN pick-lists. Whilst 2016/17 CQUIN is yet to be developed it will be recommended that CUR is also included in the 2016/17 CCG CQUIN pick lists for non-specialised.

By adopting the CUR process, and utilising the latest technology to provide real-time evidence based clinical decision support, healthcare organisations are able to address and quantify key operational issues from daily patient level assessment such as:

- What levels of clinical care do our patients need?
- What are the reasons patients are not in the most appropriate setting for their clinical needs and how can these be resolved?
- What is the impact of operational inefficiency on the organisation and when changes are made, does performance improve?
- How can we ensure that all our patients receive the right levels of care, in the right settings at the right time?
- Where and how do we need to invest in order to reduce hospitalisation and what will be the process and overall reduction in costs?

NHS England wishes to build on the progress made nationally with CUR to date by working with its healthcare providers to:

- Expand the use and impact of CUR across providers
- Support changes in clinical practice and service management
- Help tackle the costs of rising demand and delays in discharge or ‘step down’ by consistently managing more care in the setting most appropriate to clinical need
- Support the delivery of higher quality care, e.g. improving the transfer of patients to the most appropriate level of care
- Improve service efficiency, e.g. reducing average length of stay
- Improve management information, e.g. providing the evidence for key performance indicators that underpin contracts and service specifications
- Define levels of care for clear commissioning and provision
- Improve the quality of discharge and transition between care settings, for example reducing rates of readmission to hospital within 30 days of discharge

To ensure the CUR programme is effectively implemented it has been designed around three major work streams that have gone through the formal approval process with NHS England.
Five Early Implementation Sites supported by a £150,000 grant
A major CUR CQUIN scheme to support and incentivise care providers in their transformational programme and cover the costs of implementation
Accredited CUR software to call off from the Framework to Supply CUR software (July 2015).

2 CUR National Framework

The procurement process to establish a national CUR framework for the supply of accredited CUR software tools was concluded on Monday 13 July 2015.

We are delighted to be able to report that the following four CUR suppliers have been successful in securing a place on the national framework. The successful suppliers are as follows:

- Hearst Health
- McKesson
- Medworxx
- The Oak Group

A SharePoint site has been created to post resources relating to CUR and will be a useful source of information for both commissioners and providers. To be given access to this SharePoint site please provide details of your nominated lead by email to Alison.Johnson27@nhs.net. You will then be given access details. The CUR framework is now available for providers to access via the SharePoint Site.

To support this process we have produced a CUR framework user guide that aims to support and guide providers through the mechanisms by which they can access the framework. It is important that this user guide is considered alongside the national CUR framework so that providers are clear about their own responsibilities in accessing the framework, and ownership of any subsequent contract. Further information on the user guide can be accessed via the SharePoint site.

3 CUR National Framework Launch Workshops

The national CUR framework launch aims to take the use of CUR tools to the next stage by enabling providers, who are looking to implement real-time clinical utilisation review from 2015/16 and onwards with NHS England accredited CUR software suppliers as part of the national CUR framework.

To support providers in their choice of CUR software, the national CUR team will be arranging two CUR Launch workshops. These will be held on:-

- **Monday 7 September 2015** at The Studio, 14 Cannon Street, Birmingham, B2 5EP
- **Tuesday 8 September** at The Pullman Hotel, 100 - 110 Euston Road, London, NW1 2AJ

To find out more information about the workshops and to register your place, please email Elisa.Taylor@nhs.net
Following presentations from the four CUR suppliers, there will be a market place event, where both providers and commissioners will have the opportunity to discuss local requirements and the individual CUR solutions with the suppliers. Providers will then need to make the necessary arrangements to procure their preferred CUR software from the National CUR Framework Agreement.

4 CCG Recommendations

It is recommended that CCGs identify a lead to take the CUR agenda forward and attend one of the launch workshops. It is also recommended that commissioners liaise with providers to encourage provider attendance at one of the launch workshops and to facilitate engagement to take CUR forward. This will be an excellent opportunity to see the software being demonstrated and to see the differences between the software tools.

The event will be an opportunity to gain further commissioner intelligence regarding the benefits of CUR and to network with CUR leads both locally and nationally. It will also be an ideal opportunity to network with your local healthcare provider CUR leads to facilitate your involvement in their CUR implementation. Whilst ultimately the choice of software is that of the providers, CCGs are advised to work closely with each of their providers as an integral part of provider CUR implementation particularly with regard to establishing progress against the CQUINs and to maximise the benefit of the software through a joined up approach.

5 Further Information

For further information on the national CUR programme, please see contact details of the team contracted by Specialised Commissioning, NHS England to manage the CUR programme:

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