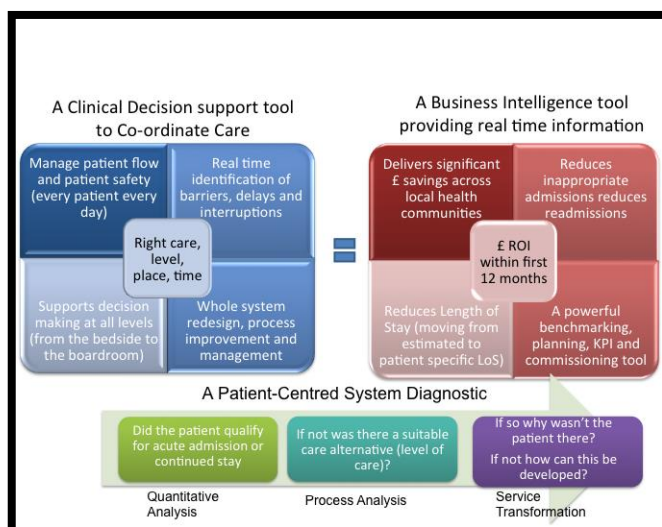


## Case Study – Establishment of national CUR Learning Network

### Situation

Clinical Utilisation Review 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*.



The Integral Health Solutions team has in-depth knowledge and unrivalled experience of CUR. We have been involved in Clinical Utilisation Reviews following the first ground-breaking, commissioner-led implementation in 2007, and most latterly, directly supporting NHS England Specialised Commissioning since December 2014 with the launch of the national CUR CQUIN, and the launch of the CUR National Procurement Framework. We have continued to support the implementation of CUR, for Tier 1, 2 and 3 NHS Providers of Specialised Services. During this time we have nurtured and built strong relationships within NHS England Specialised Commissioning, have worked across the commissioning sector and have established relationships with a significant number of Provider Trusts, and Clinical Commissioning Groups.

As part of our approach, we have established a successful national Learning Network for key NHS provider sites to support their ongoing implementation and development of CUR.

### Task

In our approach to the implementation of a national learning network, we have adopted elements of social movement theory and nudge techniques to ensure that we can create a 'Call to Action' around implementation of CUR. This has been achieved through use of a Community of Practice evidence-based methodology, using situational learning to create a



common bond and shared purpose. This has created a strong narrative that clearly articulates the benefits of adoption of CUR that can be widely shared across both Commissioners and Providers. This approach to networking, combined with action-based learning ensures we are building the knowledge base and up skilling organisations through experiential learning, tailored to each organisation's practice and culture.

Initially, our approach to ensuring that the Learning and Development associated with CUR through the initiation and introduction of a learning network, was focused on the five national Early Implementer sites (EIS). However, with the development of the three year CQUIN for CUR in 2016/17 to include pilot approaches, and the uptake by single tertiary centres, and large Teaching Hospitals, we adapted the learning network membership to include such organisations to ensure learning is transferrable.

The Learning Network provides a peer sounding board in the development of CUR, unifying processes, activities and communication to support CUR frontline delivery, and to provide a source of learning to new sites as they begin to implement. An aim of the Learning Network is to enable access to a national knowledge bank and innovative thinking, and to provide help for CUR leads to be more effective in supporting CUR to be a whole system approach. In addition, to influence future direction of CUR programmes to reflect health and social care priorities. This has been evidenced through the inclusion of CUR learning at national NHSE events, including the national clinical leaders forum and EXPO events.

## **Actions**


The national learning network meets on a quarterly basis. The agenda is co-designed with participants and to ensure it is relevant and current to organisational needs throughout the year we have devised the following principles regarding content:

- *It is a real issue or challenge;*
- *Participants care about that issue and are committed to a resolution;*
- *The issue is so complex that no single person can solve it;*
- *The issue requires diverse skills and people for a successful resolution; and*
- *There is immediacy about the issue in achieving a resolution.*

Examples of the types of sessions held have included the following:-

- action learning to better understand relationship issues within individual provider Trusts as project managers are trying to rollout CUR;
- alignment of CUR with existing ongoing transformation programmes; and
- development of CUR and use of data to create greater strategic buy-in and use of CUR data to engage whole system discussions





The sessions have been interactive in their nature and learning amongst CUR project managers has enabled wider development opportunities through information shared.

The group is also used as a sounding board for national developments to the programme. As a result, the group helped to establish the quarterly reporting structure during 2016/17 to ensure benefits are visible. More recently, the group has helped to develop the structure for the new national minimum data set which will be implemented from July 2017.

## **Results**

We have published a number of case studies from key sites to share specific learning to date. These have reflected the interpretation of unmet criteria data and how this is being reduced, the use of CUR to validate patient experience and how the use of CUR data at a granular level can help us to understand how operational decisions within the Trust impact on patient health and experience.

