CLINICAL UTILISATION REVIEW V SAFER

Are they complementary or in conflict?

By: Peter Ellis, Managing Director Medworxx UK

Shared Goals between Clinical Utilisation Review (CUR) and SAFER (RED2GREEN days)

Both of the NHS England initiatives (CUR and Red2Green) cite evidence that patients deteriorate physically and cognitively in direct proportion to their length of stay; and for elderly patients this has a significant impact on life-expectancy. Their common goal is to minimise inappropriate delays to ensure Safe, Rapid Discharge or Transition of Patients and to avoid unnecessary hospital stays at an inappropriate level of care.

Both CUR and SAFER's stated intents, are to provide transparency and rigour to managing the patient's journey to ensure, at a minimum, daily assessment of key activities and status. The key to their respective contributions to these goals is ensuring these initiatives drive action in real-time and ensure the required inputs to the plan of care are delivered as planned. Both SAFER and CUR contribute to this goal in different and complementary ways. These initiatives are interdependent and if appropriately integrated and harnessed, provide a comprehensive picture of the appropriateness of days of care across the organisation.

How does CUR support SAFER?

The underlying premise of CUR solutions is the application of evidence-based criteria to inform clinical decision making and monitor compliance. The SAFER Bundle identifies NHSI expectations but does not set out how these must be achieve. The impact of CUR on SAFER processes is outlined below:

S- Senior Medical Review of all patients before midday.
- Through CUR the review is not just opinion but supported by evidence based criteria
- CUR reports and alerts ensures action is taken on all delays

A - All patients will have an Expected Discharge Date (EDD).
- CUR requires daily review of EDD/PDD based on patient need
- Requires patient's discharge criteria to be reviewed daily

F - Flow of Patients will commence at the earliest opportunity.
- Rigour and discipline of CUR requires compliance with SOPs for Rounds/MDT meetings
- Alerts are triggered through CUR to enable timely discharge
- Displays status of concurrent issues deemed RED/GREEN and required action

E – Early discharge, 33% of patients eligible will be discharged from base inpatient wards before midday.
- CUR allows designation of day's confirmed discharges to focus action
- Daily monitoring against discharge criteria with alerts to enable timely discharge

R – Review, A systematic MDT review of patients with extended lengths of stay.
- CUR monitors compliance ensuring all patients are reviewed every day and actions taken

Integrating CUR and SAFER Assessments

The goal is to enter once and use often. Thus clinical staff do not perceive these systems as requiring duplicate data capture.

Both approaches use **RED**/**GREEN** to flag appropriate v inappropriate days of care. However, the designation of a truly conservable patient's day's stay via CUR is different from a day where an aspect of planned care did not occur. A conservable day requires the patient to be deemed ready for discharge based on explicit evidence based criteria. Each is a valuable measure of effectiveness but they need to be clearly differentiated in their use.

The evidence-based approach of CUR brings a rigour and discipline and requires the daily application of the criteria. This supports the SAFER requirements of determining the initial need for an acute bed and a criteria-based assessment of readiness for discharge. The assessments rely on evidence-based practice and eliminate the subjective variation of individual opinion.

	Does the patient need an acute bed	Has there been a Senior Medical Review	Has there been a nurse led board round	Plan and EDD updated	Daily monitoring of Treatments and Services delivered as planned	Criteria led discharge readiness assessment	Reasons and details for Barriers / Delays to safe discharge
Solutions							
Medworxx CUR Evidenced Based Assessment	**MEETS CRITERIA DOES NOT MEET**	Forms & Assessments on integrated tick box display	Encounter screen indicates if review undertaken	Updated as part of daily CUR assessment	Monitors delivery of all concurrent activities can display as Red/Green. Captures primary reason for delay for RFD patients	**RFD (ready for discharge) NRFD (not ready)**	Captures specific reason for discharge delays
SAFER Red/Green Approach	Individual clinical opinion	**YES NO**	**YES NO**	**YES NO**	**YES NO**	No evidenced based criteria	No structured process; opinion captured
Rationale of Integrated Approach	CUR Requires application of intensity of service criteria-not individual opinion	Captured during daily CUR assessment display on eWhiteboard or encounter screen	Medworxx CUR daily assessment completed prior to 10.30 meet requirement	Facilitated on Medworxx encounter screen and part of assessment	SAFER is not indicative of RFD status, only monitors patient activity	Medworxx requires patient to pass Evidence based RFD Criteria from admission	CUR captures granular reasons. Alerts ensure action, informs operational and strategic needs

Ensuring Transparency and Rigour

The Medworxx CUR solution has integrated eForms and reports that can capture and display the SAFER requirements as part of an integrated solution. It facilitates a rigorous process and monitors compliance. It allows customised reasons and details to be captured at a granular level and displayed through operational and strategic dashboards and reports. It also has the capability to trigger and escalate alerts to focus attention and support action. Finally, the Medworxx solution's accumulated data generates reports that provide evidence for quality improvement initiatives on the providers and commissioners specific areas of opportunity.