

Ranked 1<sup>st</sup> based on combined quality & value scores on the NHS England CUR framework



# Implementing MCAP

Making Care Appropriate for Patients (MCAP) is the Oak Group's Clinical Utilisation Review (CUR) tool.

The Oak Group is the most experienced CUR company currently operating in the UK. Our principle tool, MCAP, is nationally and internationally recognised as one of the best in the field. After operating in partnership with over 125 hospitals in the UK alone, our experience and expertise in understanding the idiosyncrasies of the NHS is second to none, and we are uniquely prepared to help you achieve real progress towards your institutional goals.

The Oak Group's team of nurses has extensive experience in the NHS at multiple levels of care, in multiple facilities, in DGHS and tertiary care settings, and well understands the needs and constraints of every setting. This team is backed by The Oak Group's CMO, Dr David Maltz, a physician and internationally recognised expert on admission, referral, discharge, and handover procedures with more than 30 years' experience running large CUR programs.

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## THE OAK GROUP'S EXPERIENCE AND EXPERTISE IS SECOND TO NONE

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### IT Implementation

From an IT perspective, implementing MCAP in your institution is quick and simple. The Oak Group provides MCAP as a browser-based application connecting to a dedicated server and individualised system, all of which we set up for you. MCAP includes a high degree of local configuration, including user-defined fields, all of which is under your control.

### Training

Our experienced team of nurses provides on-site, hands-on training in our tool, backed by our CMO. MCAP is quick and easy for users to pick up, and we do everything we can to make sure that users are up to speed quickly.

Initially integrating MCAP into your institution is and should be a straight-forward process and we also provide ongoing support.

MCAP has been applied in over

**125**

UK hospitals, where it has identified that

**25%**

of admissions and

**50%**

of continuing care days could be avoided or alternatively provided, typically saving

**60%**

on those days.

## Immediate Results

MCAP can provide institutions with savings starting on Day 1. Your team can begin to immediately identify patients who are clinically suitable for non-admission or discharge. We know where the most common problems are and the easiest ways to correct them. The savings are immediate and ongoing, and your team will quickly begin to understand where some of the blockages to efficient patient control lie and how, with a few simple adjustments to their standard operating procedures, patient care will improve.

## Clinician

Without the buy-in of physicians within the hospital, no CUR system can make headway. We emphasise that we will never challenge a consultant's care plan— it's not our place to say what services a given patient may need.

Our role is one of decision support. MCAP comes alongside the consultant to advise on where services can best be delivered. Studies show that when patients are treated in a setting that doesn't match their needs, quality of care suffers. But when patients receive the *right* care at the *right* time in the *right* place, everyone wins.

## Nurse

We achieve credibility with the frontline users, nurses, in two ways:

Our goal is to ensure that a patient's care takes place in the right setting for them. When a patient isn't in the right place, MCAP captures why, providing an opportunity for improvement.

Second, our experience and expertise with MCAP can help improve patient flow, meaning that more patients can get the care they need in a more timely fashion while freeing resources.

## Management

MCAP gives unparalleled insight into the operations of hospitals, opening new scope for institutional change to improve quality of care and free vital institutional resources. As part of the review process, MCAP captures data about the care context that could also be used for KPI's. MCAP can then generate a flexible series of reports which detail not only whether the patient's admission or day of stay was qualified or not but the context of that care and, for non-qualified days, the reasons why the patient was at the wrong level of care to help discover and correct bottlenecks in patient flow.

## Long-term Support

The Oak Group stands by you for the long haul. We recognise that the initial setup will need review, modification and further local configuration to meet your particular needs, help you achieve optimal performance and maximise return. Our system can be adjusted over time as your needs change to help you continue to identify new opportunities and efficiencies. We can help you discover what works and what doesn't going forward, and we stand ready, willing, and able to do so.



For more information on how the Oak Group and MCAP can help your organisation, contact us at:

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