



Executive Summary: The CURE Project: Cost Benefit Analysis

This paper sets out the results of a cost benefit analysis using the outcome data from the CURE Project pilot that ran at Wythenshawe Hospital from 1st October 2018 to 31st March 2019. These results are used to model the impact of rolling CURE out across Greater Manchester.

Key results

- The cost per smoking patient engaged by the programme in the CURE pilot was £104.23.
- The cost per quit at 12 weeks post admission with the intention to treat was £475.
- Gross financial return on investment ratio:
£2.12 return per £1 invested
- Cashable financial return on investment ratio:
£1.06 return per £1 invested
- Public value return on investment ratio:
£30.49 return per £1 invested

Key conclusions

The CURE cost per quit is cheaper than the NW average (£532) and the England average (£490). Even assuming that none of the future healthcare savings assumed above would be cashable, the ICER for this study would be £487. Programmes with ICERs less than £20,000 are deemed by the National Institute of Health and Care Excellence (NICE) to be value for money. Therefore this programme can be seen to be very good value.

