

Reducing alcohol-related hospital admissions in Wakefield

Jez Mitchell, Public Health Principal, Wakefield Council

Dr Linda Harris, Chief Executive, Spectrum CIC

Alcohol Care Teams

- Secondary care alcohol specialist services of varying configuration.
- Deliver range of interventions including IBA, medically assisted withdrawal, relapse management.
- Aim to improve care, reduce number of admissions, readmissions and length of stay – saves £££
- Shown to reduce alcohol-related A&E attendance, hospital admissions and re-admissions and improve the care of patients. In addition they have also been able to demonstrate significant costs savings.
- Advocated by health bodies, NICE, national strategy, long term plan.
- Admissions have been increasing since 2004/04 accounting for over 1 million admissions in 2014/15.

Source: PHE, 2016

Why invest?

- 25% rise in the rate of increase for alcohol-related hospital admissions.
- Between 06/07 and 09/10 alcohol-specific admissions increased by 71%.
- The cost to NHS locally estimated at £8 million , £2.5m readmissions
- One third of A&E attendances were alcohol related
- As part of the Alcohol Place Based Budgeting Project 20 patients frequently attending A&E were identified as misusing alcohol. During a 5 month period they accounted for 202 A&E visits resulting in 78 admissions costing £172,000.
- No formal detection procedures and inefficient discharge plans - with one in five patients presenting to A&E who were “apparently intoxicated” discharged in an unplanned manner
- Two-year pilot commissioned, funded by PCT and Council (Public Health).

Alcohol Liaison Service

- Employs two full time nurses; dual trained in substance misuse and experienced Non Medical Prescribers (NMPs).
- Aims to identify and treat, hazardous, harmful and dependent drinkers admitted to Pinderfields Hospital
- Available Monday – Friday 9am – 5pm; outside of these hours referrals are captured by ward staff and the Emergency Department and picked up the following day.
- The ALS collects all referrals daily and liaises with the service user either via the telephone, letter or a visit during their stay at Pinderfields.
- In addition, supports continuous capability and capacity building at MYHT though training and awareness raising both formal and informal with A and E and MAU and Ward Staff

Social Return on Investment - Methodology

- In 2017 Spectrum CIC commissioned an SROI on the Alcohol Liaison Service (ALS) in particular the detoxification programme and its impact on :
- The SROI methodology summarised impacts and benefits for range of stakeholders across the following:

1. Social Outcomes	2. Economic Outcomes
3. Environmental Outcomes	4. Community Regeneration Outcomes

SROI Cohort

- ALS: 52 patients reviewed in service
- April to June 2017
- Range of outcome measures (NHSE TOPS form)
- Key Performance Indicators (Commissioners)
- Case studies to assess impacts on individuals

ALS SROI

The Social Return on Investment (SROI) calculation for the service:

For every £1 invested in this service, it generates an average SROI value of £13.67, totalling a social value of over £300k per quarter.

Case Study:

‘Bruce, Aged 53’

History:

- Admitted to MAU following seizure at home, having abruptly stopped drinking

Intervention:

- Assessed by ALS nurse, using CIWA tool;
- Demonstrated symptoms of confusion and confabulation
- Advice and facilitation of agreed hospital joint protocol for medically assisted withdrawal and further MDT assessment for ? Korsakoffs syndrome
- Prophylaxis to prevent Wernicke's
- Support for clinical monitoring provided on the ward during acute phase of detoxification
- Appropriate medication prescribed and a care plan devised aligned to national guidance
- Education and awareness raising of risks associated with abrupt alcohol withdrawal and process of detoxification

Outcomes:

- Regular review by ALS nurse empowered Bruce to identify behaviour change objectives and increase chance of sustainable change
- Support from the ALS nurse facilitated early discharge with remaining detox at home – step down to our own community team – seamless care, shared protocol
- Following detox, Bruce attended the ‘ALS outpatients’ to access relapse prevention treatment, support pharmacotherapy for abstinence, liaison with local GP surgery , improved patient and carer experience
- Bruce continues to engage with ongoing recovery programmes and talking therapies and is now a champion of the service supporting awareness raising sessions

Case Study:

‘Susan’ 38 year old woman

History:

- Started drinking heavily to cope with bereavement and violent partner
- Engaged with Early Help Hub for support with her child's needs following HV referral
- Admitted to hospital with quinsy, reported she was not coping and was drinking heavily;
- Referred to ALS and alcohol detox was agreed as an ALS outreach offer into community (building on trust and rapport established on the hospital ward)
- Emergency care order for child organised with grandparents
- ALS nursing team provide specialist input into the integrated safeguarding plan

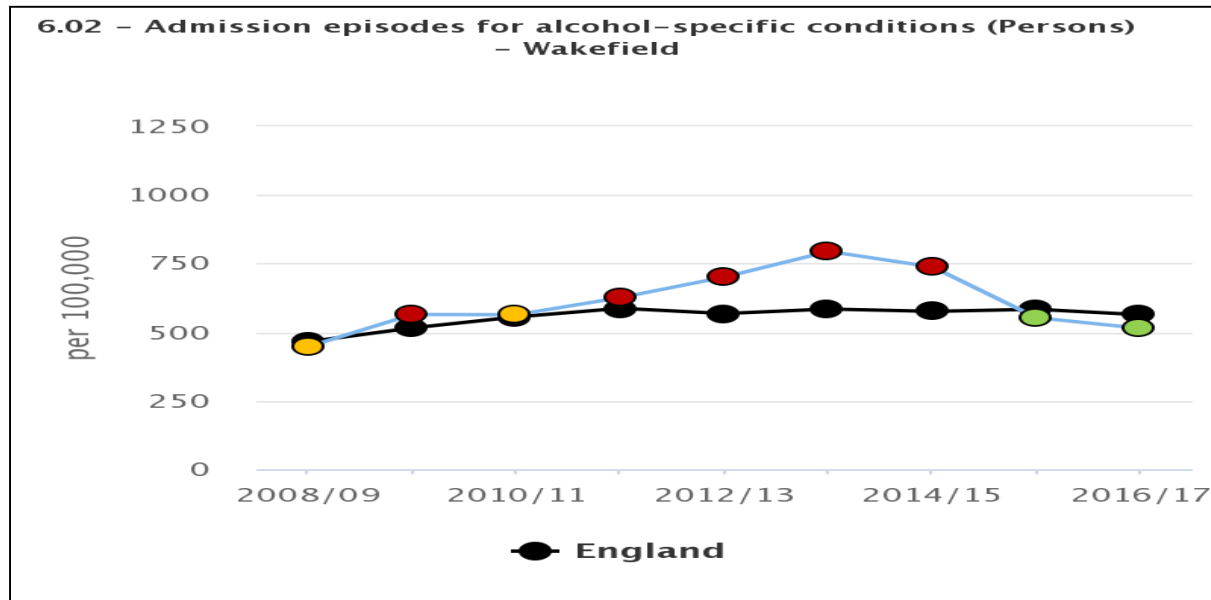
Outcomes:

- ALS working in partnership with Early Help Hub, provided community detox and community abstinence programme integrated with safeguarding and Safe at Home Team (Domestic Abuse)
- ALS provided support throughout detox and delivered relapse prevention treatment
- Today Susan is alcohol free and is receiving counselling for those affected by domestic violence and bereavement
- Susan has rebuilt her social circle and is seeking opportunities to return to work
- Improved family relationships resulting in her children being happier and more settled

Analysis

Alcohol-specific admissions

Source: Public Health England



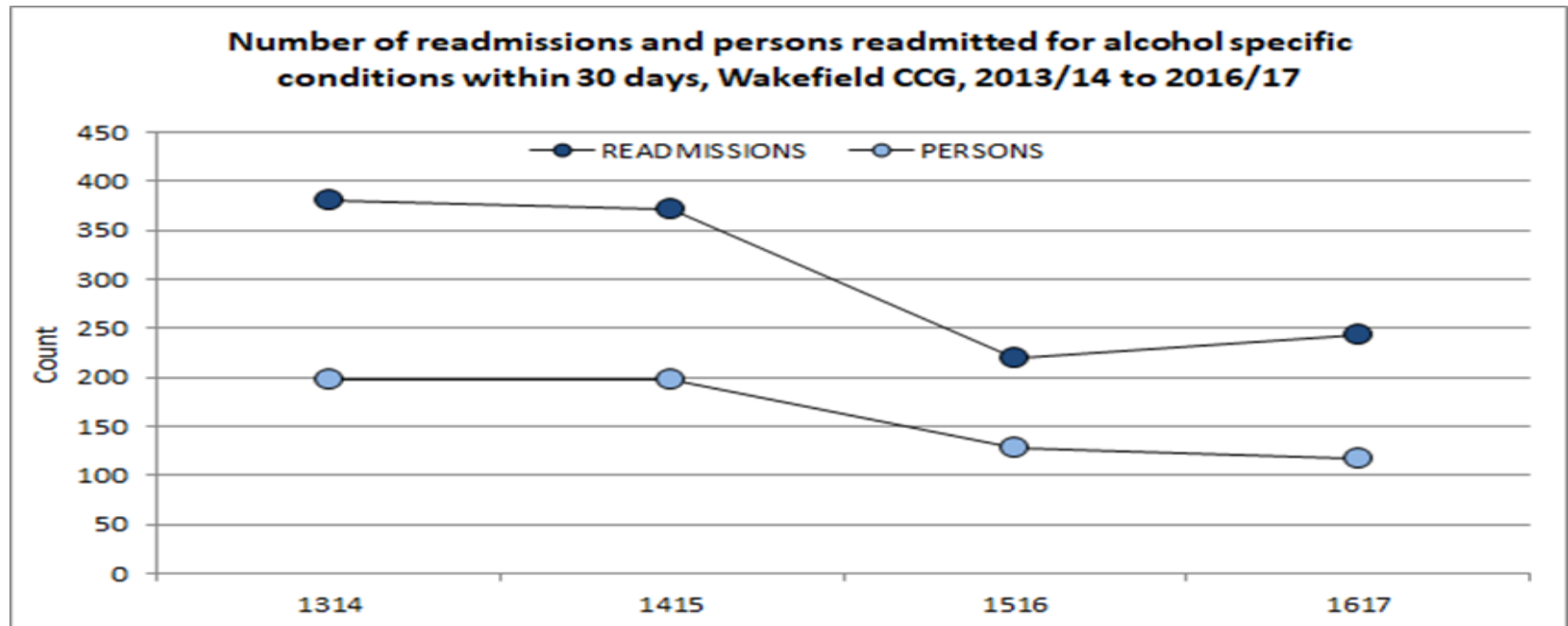
- Significantly higher than average in 2014/15.
 - Significant drop in 2015/16 to below England average.
 - 34% reduction 2013/14 and 2016/17
- A&E attendances over the same period reduced by almost 30%

Analysis

Readmissions

Source: Public Health England

- Between 2013/14 and 2016/17 the number of readmissions reduced by 36%

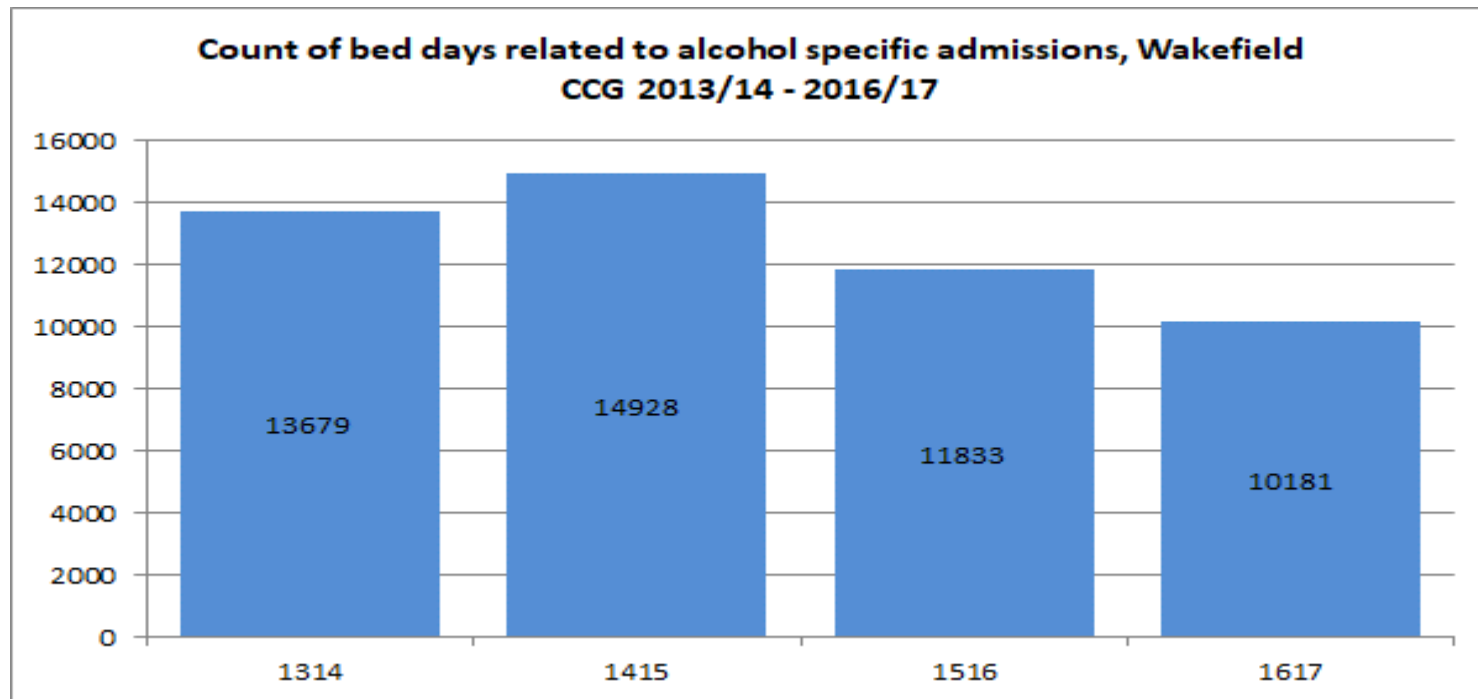


Analysis

Bed days saved

Source: Public Health England

- Corresponding reduction of over 3,000 bed days between 2014/15 and 15/16 .
- Between 2014/15 and 2016/17 there has been a reduction in annual bed days of almost a third (32%).



Analysis

£££ savings

Source: Public Health England

- 18% reduction in the overall cost of alcohol-specific admissions in 2016/17.
- An estimated saving of £1.5 million over the 4 year period.

Year	Costs
13/14	£3,988,000
14/15	£3,950,400
15/16	£3,238,300
16/17	£3,255,100

Thank you Questions?

jezmitchell@wakefield.gov.uk

Linda.Harris@spectrum-cic.nhs.uk