

NHS Board meeting
30 October 2019

Lanarkshire NHS Board
Kirklands
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SUBJECT: High Resource User Project

1. PURPOSE

This paper is coming to the Board:

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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2. ROUTE TO THE BOARD

This paper has been:

Prepared	<input type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input checked="" type="checkbox"/>
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This paper has been endorsed by the North Lanarkshire Health and Social Care Partnership Senior Leadership Team.

3. SUMMARY OF KEY ISSUES

“Individuals who frequently attend Emergency Departments (ED) are typically considered to be psychologically and socially vulnerable in addition to experiencing health difficulties” (Daniels J, 2018 Feb)

Evidence highlights a small population of individuals frequently utilise ED to access care. These people often have complex mental health, physical health and addiction issues. High rate ED attendance can be characterised as people who attend a health care facility between three and 12 times per year. It is also recognised that people in this category have greater rates of admission and a greater burden of chronic disease and that this group of people are often high intensity users of other health and social care services

An analysis of high frequency Emergency Department (ED) attendees by Public Health in Lanarkshire highlighted that over 40% were also high attendees in previous years. This work also found that individuals who frequently attend ED often have complex medical and psychosocial needs. They are typically considered to be psychologically and socially vulnerable in addition to experiencing health difficulties. ⁽¹⁾ This work recommended that a more proactive approach may reduce unscheduled service use for these individuals.

To date, there has been no coherent approach to meet the needs of individuals that use emergency departments frequently. ED's manage these presentations acutely however, the department is only able to provide episodic care on each independent visit and doesn't address any underlying causes. A proactive multi agency approach has the

potential to not only improve the outcomes for individuals and families but also improve service efficiency and effectiveness.

A business case was developed and funding was secured within North Lanarkshire's HCSP for two Band 7 staff. The role of staff was to identify very frequent attenders at University Hospital Wishaw (UHW) ED from the Wishaw and Motherwell Localities; explore their cases and deliver an intensive care management approach but more importantly develop an understanding of why our current services are not meeting their needs. The rationale was that a whole systems approach with compassion, collaboration and clear roles at the centre enable and empower individuals to manage their own conditions, connect with their communities and build on strengths.

Baseline data was collated from the three NHS Lanarkshire ED sites and individuals identified as high resource users over period June –August 2018 were identified. Staff identified 26 individuals across Motherwell and Wishaw localities as frequent attenders. A risk assessment to determine whether or not appointments could be given within own home or within health centre setting was undertaken. It should be noted that those offered health centre appointments as they were deemed too high risk to visit at home did not engage. All individuals were contacted twice, 16 engaged all of whom were given home appointments. Over 50% of these individuals were working with other services at time of engagement.

All 16 individuals were provided with a holistic assessment, which explored their underlying needs. Non-specialist individualised wraparound support was provided. By investing time with individuals it was discovered and identified that services were not in place or being optimised and that in some cases individuals required to be re-engaged to services known to them. The High Resource User Project identified various unmet health and social care needs such as:

- Health needs including issues around medication (prompts, recording and administering) as well as delays in referrals to other services and teams such as Falls, Respiratory, Addictions Recovery Team, Podiatry, Dietetics and Ophthalmology
- Diverse range of social care needs identified through investment of time and engagement with the individuals.

Throughout the project there has been over 550 separate contacts made for these individuals, carers, services and agencies to address the unmet needs highlighted during the assessment. In order to do this the team liaised with services already involved within their care, identified gaps and referred to appropriate services when needed. By providing home visits the team have enabled the individuals the opportunity to reflect and think on what they need or would like to participate in order to improve their health and well-being. This resulted in over 50 non clinical service referrals made to programmes such as Well Connected, Income Maximisation, Carers Support, North Lanarkshire Leisure (NLL), and other various 3rd sector organisations such as Ponies Help Children and Men's shed. This shift in the balance of power has enabled the individuals to look at alternatives to medical services and programmes, reconnect with their communities and begin to self-manage their care

Mr Ryan Todd shared his experience of engaging with the High Resource User Project as part of 'What matters to you?' Day activities 6 June 2019.

<https://vimeo.com/366268394>

Although the project has produced positive results for the small cohort identified there were issues highlighted by the team which are listed below.

- Gathering of the information was difficult due to differences between IT systems.
- Inadequate communication between staff and the individuals
- Wide and varied assessment processes
- Lack of evidence of case management and ownership by existing services
- Lack of evidence of a trauma informed work force

Plans are in place to extend the project from September 2019 for an additional year to examine if mainstream services, that have already been identified as being involved with these individuals can be supported to take a similar care managed approach whilst achieving similar results.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate Objectives	<input checked="" type="checkbox"/>	AOP	<input type="checkbox"/>	Government Policy	<input type="checkbox"/>
Government Directive	<input type="checkbox"/>	Statutory Requirement	<input type="checkbox"/>	AHF/Local Policy	<input type="checkbox"/>
Urgent Operational Issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

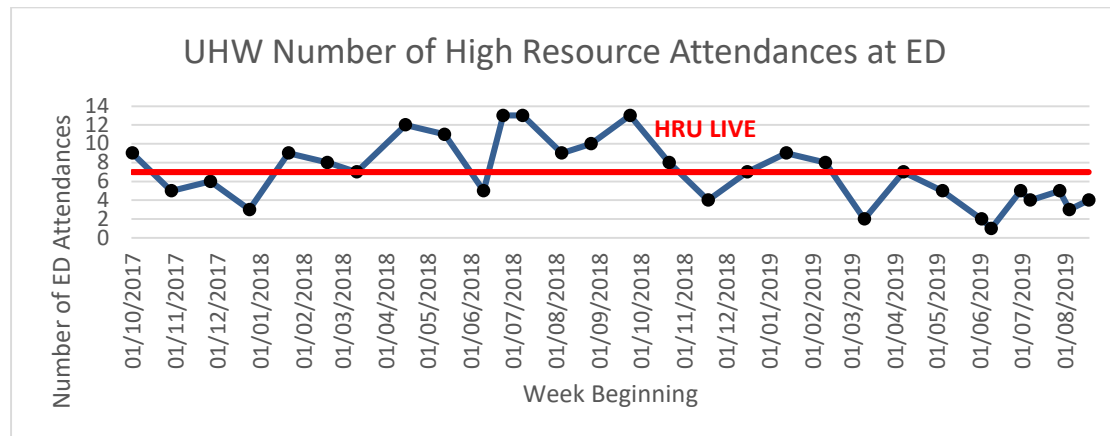
6. MEASURES FOR IMPROVEMENT

The aim of the High Resource User project is to improve the health and wellbeing outcomes among high users of emergency department, with the improvement aim:

To reduce the ED attendances of the selected cohort at UHW ED by 10% by the end of March 2019. This was later amended to 20% by August 2019.

Overall, the findings show that by working with individuals using a case management approach ED attendances can be reduced and the individual's clinical and social outcomes improved.

There was a reduction of 36% in ED attendances by this cohort. There has been a significant decrease in the number (131) of attendances to the ED since the beginning of the project November 2018 until August 2019 as shown in Run Chart 1. Further analysis of data suggests that 52% of all remaining ED presentations had the potential for redirection into existing community based services. Although numbers are small the run chart below shows a definite shift.



Run Chart 1. Monthly ED Attendances for Cohort 1.

7. FINANCIAL IMPLICATIONS

The number of ED episodes in cohort 1 decreased by 36%; 212 before the intervention, to 133 after the intervention. This will have capacity and financial implications for the organisation which are now being explored through economic analysis with ISD. The project was completed within agreed funding limit and funding has been agreed from Sept 2019 for additional year via HSCP North.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

None

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance Management	<input checked="" type="checkbox"/>	Equality	<input checked="" type="checkbox"/>
Sustainability Management	<input checked="" type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT / FAIRER SCOTLAND DUTY

Yes No

11. CONSULTATION AND ENGAGEMENT

Ongoing consultation between services/stakeholders takes place monthly at the Project Meeting.

Currently working on finalising the project report with economic analysis from NHS National Services Scotland.

Information from High Resource User Project to be shared via Quality Week activities November 2019.

12. ACTIONS FOR THE BOARD

The Board are asked to note:

Approval	<input type="checkbox"/>	Endorsement	<input type="checkbox"/>	Identify further action	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>		

1. the success of the project; and
2. that funding has been secured for a further year from Sept 2019

13. FURTHER INFORMATION

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