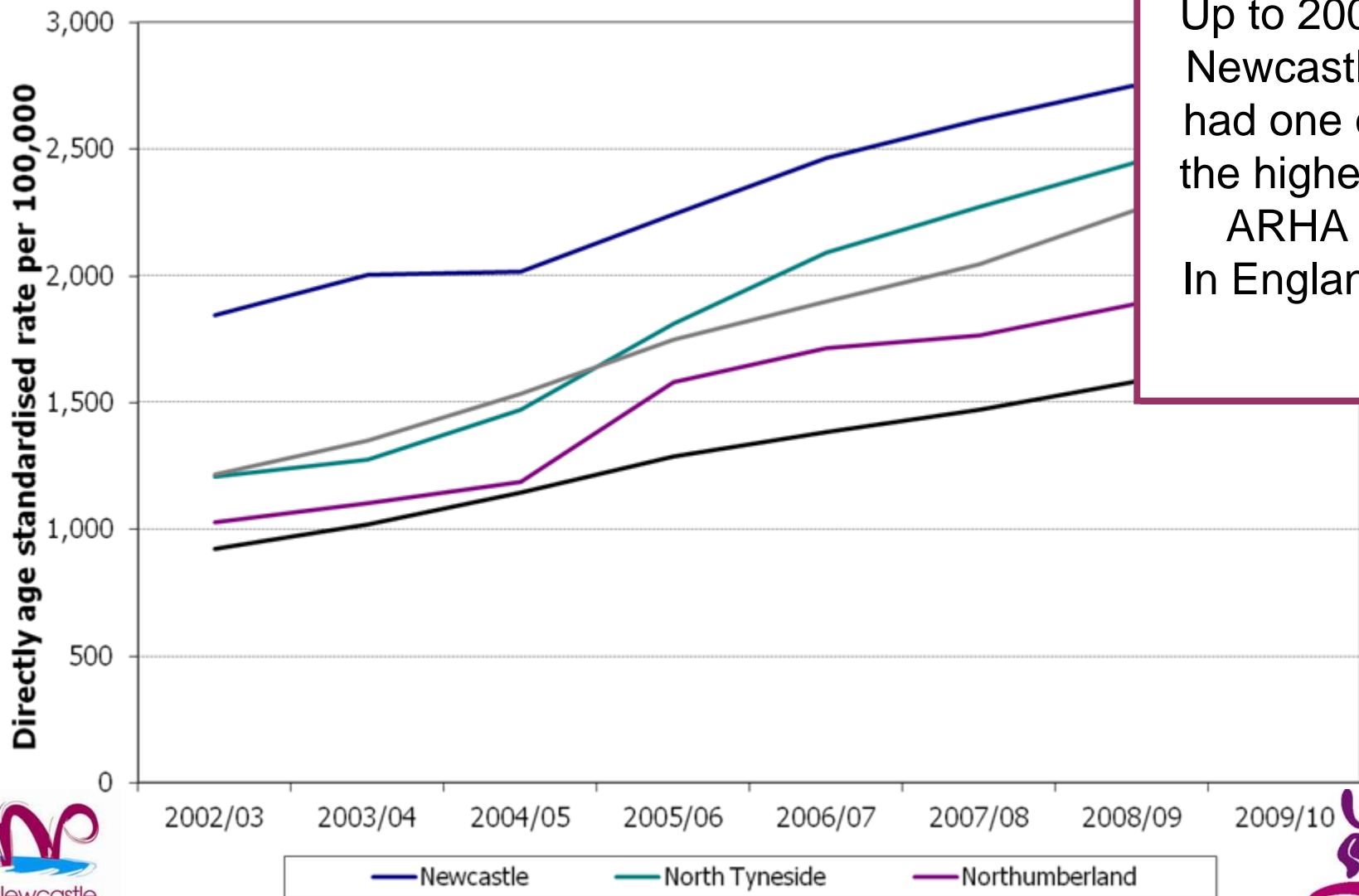




newcastle acts
Newcastle Alcohol Care and Treatment Service

Margaret Orange
Treatment Effectiveness and Governance
Manager



Up to 2009
Newcastle
had one of
the highest
ARHA
In England

ARHA data

- 47 codes
- 13 - Wholly attributable to alcohol
- Remaining – Partially attributable
- National data set – NWPHO
- National Indicator – NI39

Analysing the data

- Hospital Admissions Only – Requested data set
- Postcode/ GP / NHS number
- up to 7 identified codes accepted
- Wholly attributable to alcohol (main focus)

K70 – Alcohol liver cirrhosis

F10 – Mental and Behavioural disorder due to alcohol

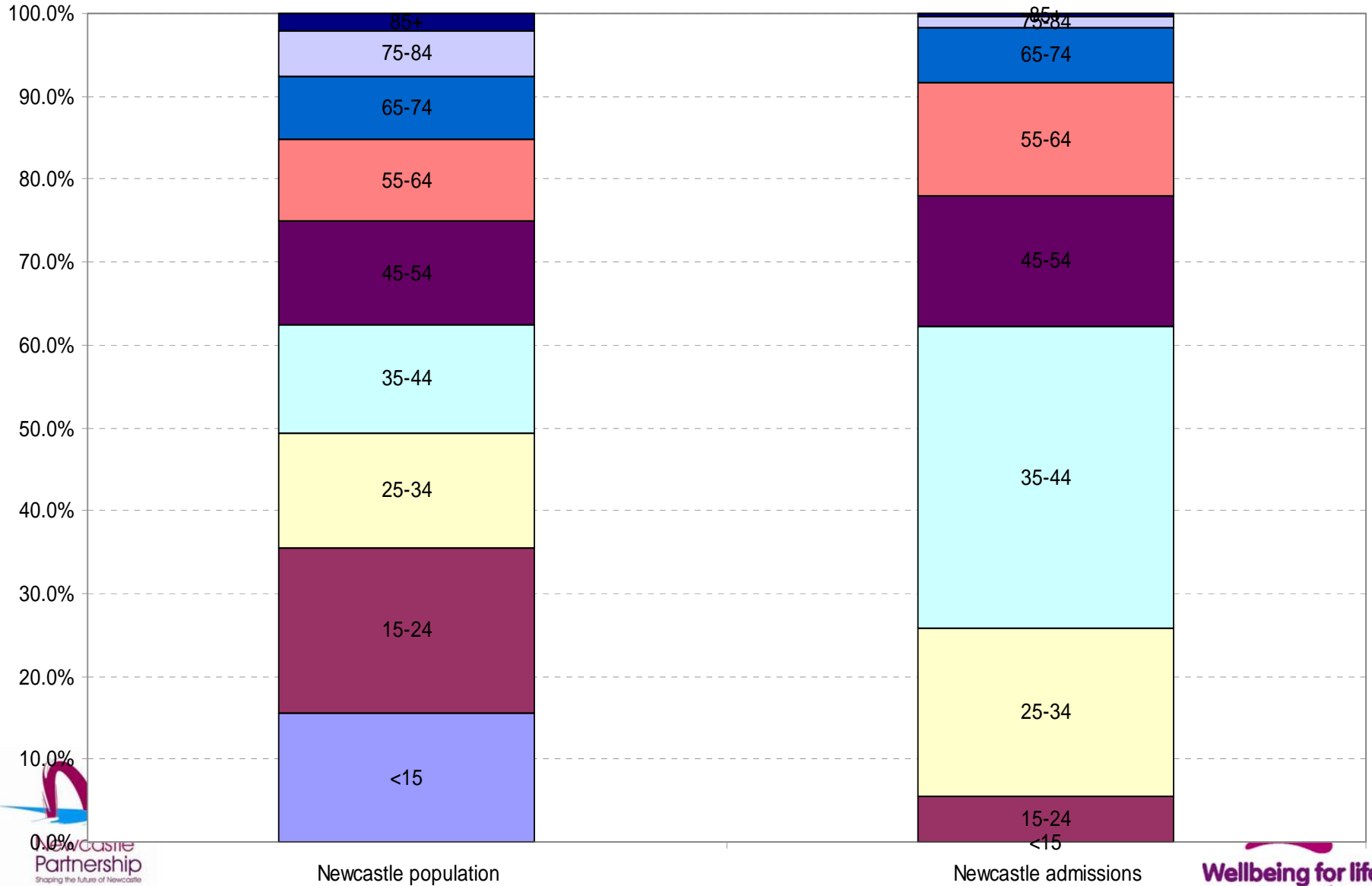
T51 – Alcohol intoxication

Analysing the data

- 1411 admissions - (707) patients
- Costs = £2.5m
- 943/1411 readmissions (66.8%)
- 239/707 patients readmitted (33.8%)
- 153 males & 86 females
- 468/707 patients admitted once (66.2%)
- age breakdown

Newcastle

Proportion of population in each age group. Newcastle population as a whole and Newcastle admissions 1/4/07 - 31/3/09



Segmentation - understanding the patient layers

- Patients admitted to hospital for 1 day or less (no overnight stay)
- Patients admitted only once
- Patients admitted once for intoxication / patients re-admitted for intoxication
- Patients with multiple re-admissions for alcohol-related harm (*harmful and dependent drinkers*)
- Patients with chaotic lifestyles accessing hospital services across the 3 PCT/Local Authority areas
- Patients with severe ongoing/end stage illness

Phase 1

Initial target groups

- Patients re-admitted for intoxication

	Male	Female
Newcastle	44	49
North Tyneside	22	22
Northumberland	17	25

- Patients with multiple re-admissions for alcohol-related harm
(*harmful and dependent drinkers*)

20% of patients using over 70% of the costs

- Patients with chaotic lifestyles accessing hospital services across the 3 PCT/Local Authority areas

North of Tyne 12

Example of a re-admission record

Codes listed	
K703 (primary diagnosis)	Diseases of the liver
F102	Dependence syndrome
I10X	Hypertensive diseases
J459	Chronic lower respiratory diseases
R18X	Symptoms and signs involving the digestive system and abdomen
Z720	Persons encountering health services in other circumstances
Z867	Persons with potential health hazards related to family and personal history and certain conditions influencing health status

Example of an intoxication record

Codes listed	
T40 (primary diagnosis)	poisoning by drugs, medicaments and biological substances
X620	intentional self harm
T51	intoxication/toxic effects of substances non medicinal as to source
S099	injuries to head
W19	fall
F101	harmful use

Needs Assessment

- Support the tier 3 specialist service
- Build capacity in tier 1 services
- Assessment, clinical interventions, care coordination
- Community/home detox where appropriate
- Alternatives to hospital admission
- Facilitate earlier, planned & coordinated discharge
- **Address the NI 39 indicator**

Reducing hospital admissions

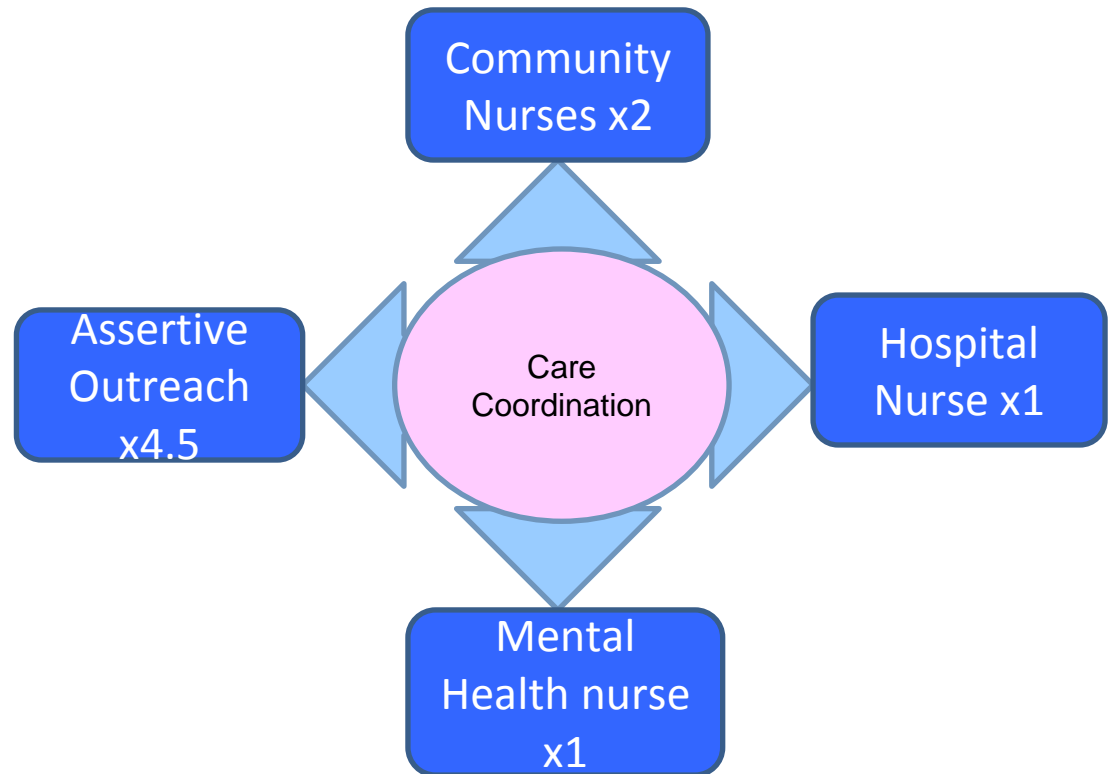
- Hospital admissions only
- Wholly attributable fraction
- “frequent fliers”
- Outcome improvement likely
- Reduction in admissions likely



The role of ACTs

A partnership approach to;

- Identify alcohol admissions
- Multi agency care planning meetings
- Care coordination
- Provide alternatives to hospital admission



Multi-agency approach

- **Primary Care**

Treatment Effectiveness Manager

Community Matron

Alcohol Nurse Specialist (Primary Care)

- **Mental Health Trust**

Alcohol Nurse Specialist (Mental Health)

- **Acute Hospitals Trust**

Alcohol Nurse Specialist (Acute Services)

- **Tyneside Cyrenians**

X4.5 Assertive Outreach Workers

Acts Philosophy

- Long term condition philosophy
- Community Matron Model
- Advanced clinical skills
- Medicines management
- Innovative case management (MAMs)
- IBA Strategy

Community Matrons

Community Matrons promote and provide care at home with the aim of avoiding, where at all possible repeated hospital admissions.

Community matrons work with patients who are:

- Experiencing long term illnesses
- Over 18
- May benefit from early hospital discharge
- Have had repeated hospital admissions

Your GP may ask the Community Matron to contact you to offer you support if any of these issues apply to you.

They can:

- Meet with you and find out how they can help you to be as well as possible.
- Make plans with you to achieve this. Involve your family or carer if you would like this.
- As part of the plan liaise with others involved with your care.



newcastle acts
Newcastle Alcohol Care and Treatment Service

Imelda O'Mahony
Community Matron

Background

- Pre – acts
 - 7 ARHA in 7 months
- Codes
 - T51 intoxication
 - F10 harmful use
 - K70 alcoholic liver disease

Challenges

- Ambivalent use of alcohol
- Mental health history
- Social anxiety
- Deteriorating physical health
- Family/relationship difficulties

Acts involvement

- Assessed at GP practice
- Multi-agency meetings
- Seen 3x per week
- Exploration of ambivalence
- Monitor physical health
- Props referral
- Mental health referral
- Introduction to recovery services

Current Situation

- Continued ambivalence
- Ongoing support
 - Physical wellbeing
 - Attendance at hospital appointments
 - Psychotherapeutic support
- Considering the use of rehab

- 6 ARHA in 14 months



newcastle acts
Newcastle Alcohol Care and Treatment Service

Lorraine Hussain
Alcohol Nurse Specialist

Background

- Pre – acts
 - 4 ARHA in 14 months
 - Drinking 4 litres of 7.5% cider (30 units daily)
- Codes
 - F10 harmful use
 - K70 alcoholic liver disease

Challenges

- Significant health issues
 - Requires hip replacement
 - Oesophageal Varisces
- Lives alone
- Vulnerability

ACTS INVOLVEMENT

- GP liaison
- Multi-agency meetings
- Seen three times a week by team.
- Slow reduction planning with intensive support
- Psychotherapeutic work
- Referral to Occupational Therapy
- Referral to Physiotherapy
- Referral to recovery centre
- Physical activity
- Social support
 - Money management
 - Appointment attendance

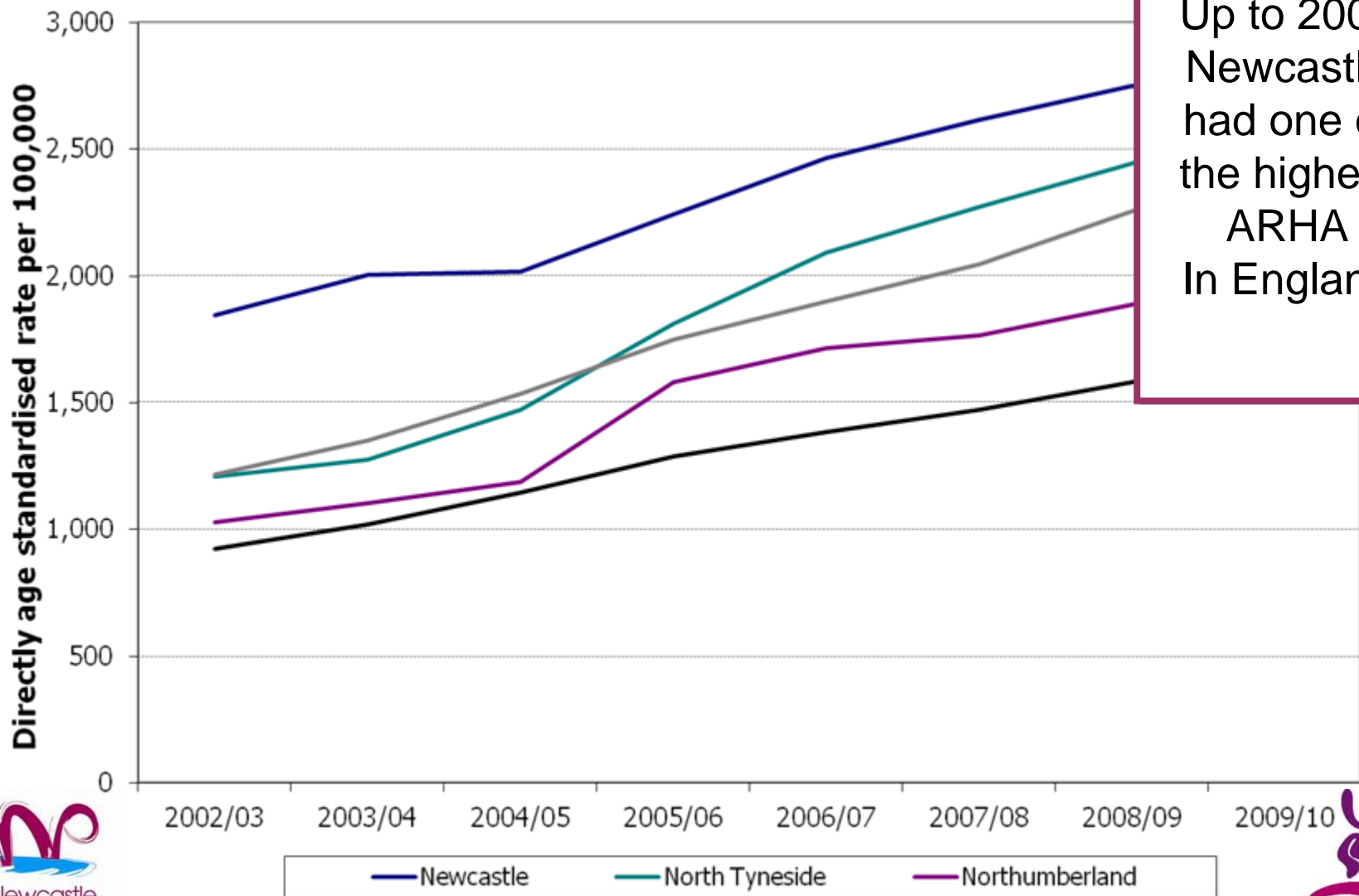
Current Situation

- Current consumption - 1 pint of 7.5% daily
- Fear of sobriety
- Triggers
 - Sport
 - Family
- Awaiting surgery (6months)
- Vulnerable adult

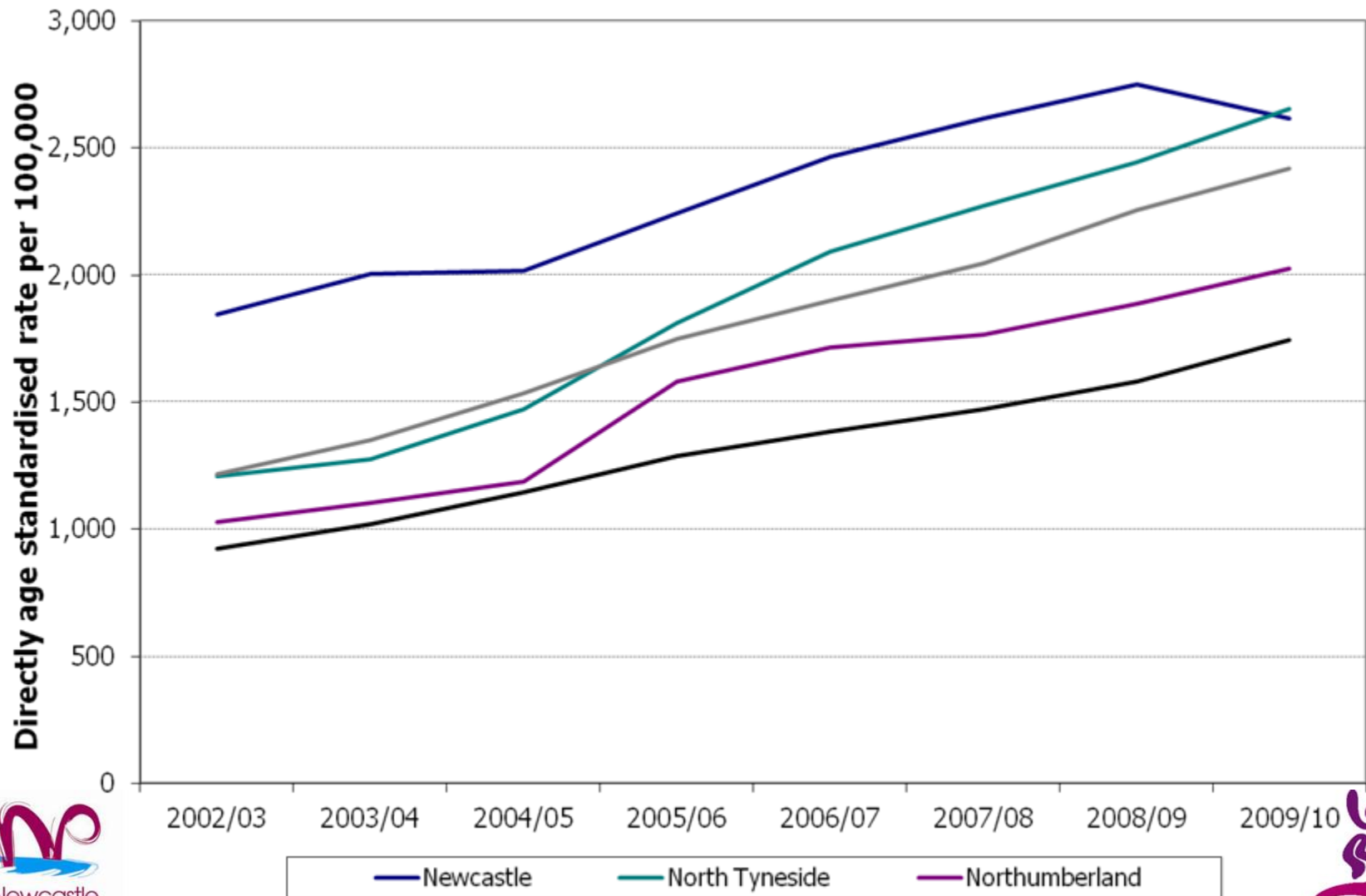
- 1 ARHA in 6 months



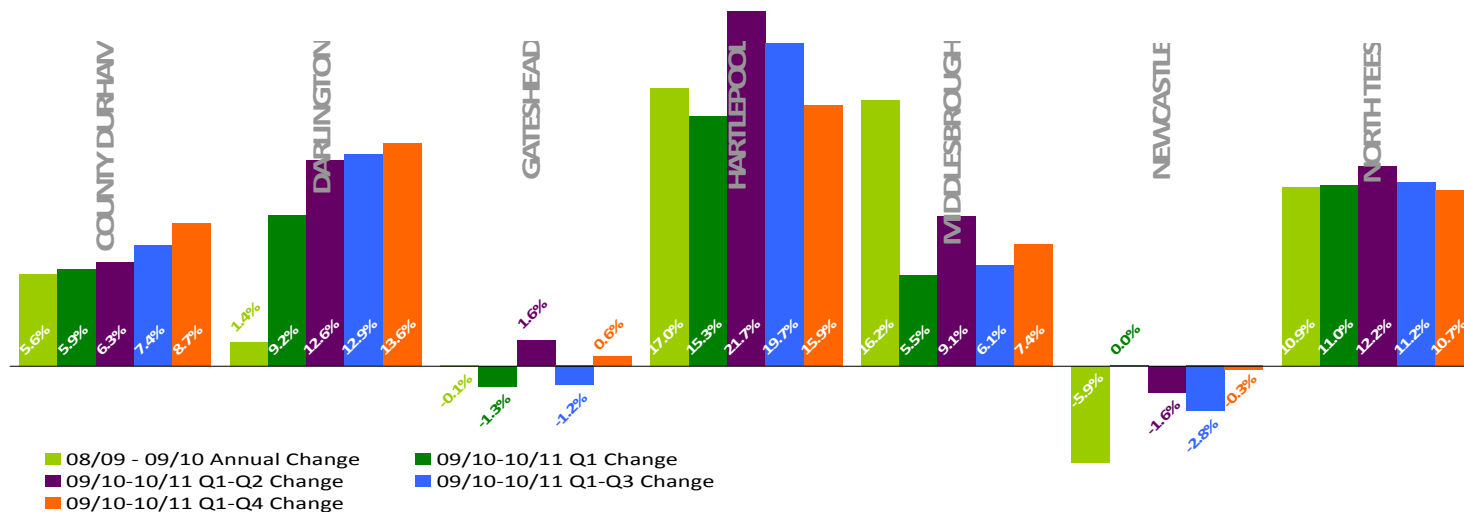
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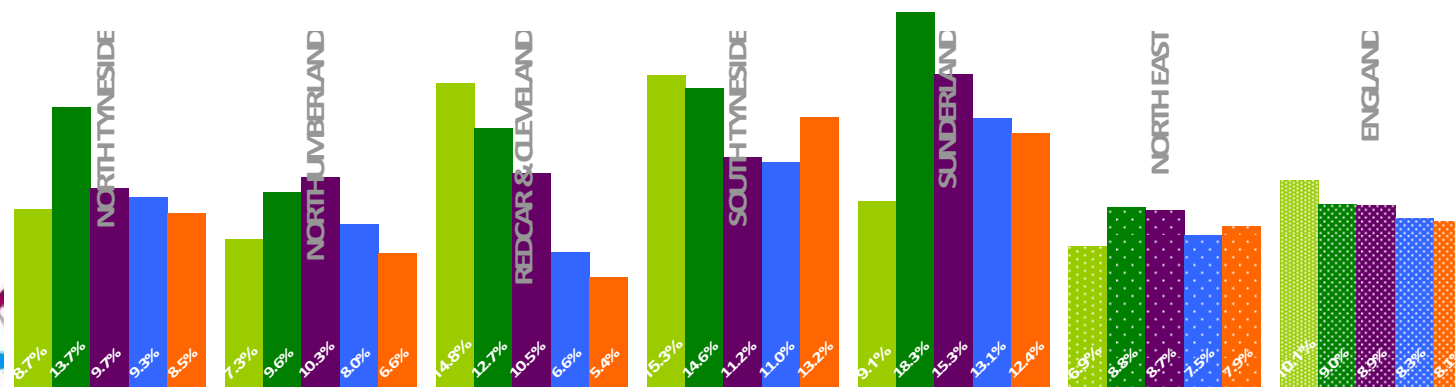
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2009-10 - 2010/11 Q1-Q4 and 2009/10 Quarterly change in alcohol related hospital admission



■ 08/09 - 09/10 Annual Change ■ 09/10-10/11 Q1 Change
■ 09/10-10/11 Q1-Q2 Change ■ 09/10-10/11 Q1-Q3 Change
■ 09/10-10/11 Q1-Q4 Change



Actual rate of ARHA:

- Newcastle
- North East
- England

Ranked nationally:

1st

1st

1st

2nd

3rd

2nd

2nd

12th

21st

1,843
1,216
925

2,003
1,352
1,022

2,016
1,535
1,144

2,244
1,749
1,290

2,465
1,898
1,384

2,615
2,046
1,473

2,748
2,251
1,582

2,585
2,406
1,743

2,578
2,597
1,884



Newcastle
Partnership
Shaping the future of Newcastle




Wellbeing for life
Newcastle

Age	Admissions pre-ACTs	Admissions post-ACTs
36	22 admissions over 24 months	1 admission over 3 months
54	17 admissions over 23 months	1 admission over 6 months
35	6 admissions over 18 months	0 admissions over 14 months
42	30 admissions over 24 months	0 admissions over 3 months
40	4 admissions over 12 months	4 admissions over 19 months
57	4 admissions over 14 months	1 admissions over 6 months
56	12 admissions over 16 months	0 admissions over 8 months
42	30 admissions over 24 months	0 admissions over 3 months
42	12 admissions over 24 months	6 admissions over 21 months
41	2 admissions over 18 months	4 admissions over 9 months

So Why does it work?

- **The Service**
 - Philosophy
 - Flexibility
 - Skill base
- **The client**
 - Relationship
 - Coordination of care
 - Skill base



To come:
formal evaluation
and
research