



AVOIDING ATTENDANCE AND ADMISSION in Long Term Conditions

NEWSLETTER Issue 2
July 2015

This is the 2nd newsletter for the NIHR CLAHRC YH Avoiding Attendance and Admission theme. I am pleased to say we've made some excellent progress in the six months since our last newsletter. In this 2nd edition we update you on progress with four studies closely related to the overall theme: work around GP services located in the ED; management of frequent attenders to ED; migrant use of emergency services; and pre-hospital mental health nurse triage.

The main focus of the early part of the theme work has been to set up our large routine emergency and urgent care (EUC) data studies. A key aim is to link pre-hospital and hospital data to describe the patient journey in the EUC system in Yorkshire and Humber. We have now collected data from eight of the fourteen hospital trusts in the region towards this goal and the pre-hospital data from the Yorkshire Ambulance Service (YAS) has now been approved for release. We are also collecting HES data to provide further breadth to the analysis and this data has now arrived in the department. We are delighted to introduce Saleema Rex in this newsletter, who is the data management specialist working very hard on this all this data at the moment.

For the Senior Doctor Triage Study introduced in the last newsletter, we had an excellent workshop in March at which the initial findings were reported to clinicians attending from over 11 trusts. Our other two core studies which are scoping effective interventions in EUC in Y&H are well advanced, at analysis stage and publication drafting respectively.

So overall, there feels like a lot of exciting and potentially very useful work underway and we hope you find this newsletter interesting and informative. All the best for the summer and we hope you all have some great holidays if you find the time!

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Reducing frequent attendance in Emergency Care through improving care pathways

Aim: To identify whether more appropriate support and services can be provided for people who attend emergency care services frequently.

Methods:

- Literature review – To identify definitions of frequent attendance, characteristics of frequent attenders and evidence of potentially effective interventions to reduce frequent attendance.
- Data analysis – Comparison of frequent and routine attenders using data provided by the A&E department at the Northern General Hospital, Sheffield Teaching Hospitals NHS Foundation Trust.
- Interviews - To explore the views of service users and providers on what type of support or interventions they think might be more appropriate.

Progress:

We have identified a sub-group of frequent attenders whose attendances appear to be influenced by health related anxiety.

We intend to conduct interviews with this sub-group of frequent attenders and their staff in September 2015.

Suzanne Ablard [s.ablard@sheffield.ac.uk]

Evaluating the impact of GP Colocation across Yorkshire and the Humber on Emergency Department (ED) workload

Aim: To identify the clinical and cost effectiveness of GP's working within or next to the ED, the best service model, and factors that facilitate and inhibit these service models.

Methods:

- Questionnaires (All ED's across South Yorkshire and Humber) – To gain an insight into different models of service delivery by primary care services.
- Interviews (3-4 ED's across South Yorkshire and Humber) – To understand the barriers and facilitators to establishing and operating a GP service within or next to the ED.
- Data Analysis – To establish the impact of GP's working within or next to the ED on ED performance.

Progress:

- Questionnaires have been sent to all ED's across South Yorkshire and The Humber.
- Prepared a proforma for each ED describing the GP service model which is being used.

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New projects



An exploration of migrant use of emergency services in the NHS England

This research aims to explore whether there are difference in utilisation of emergency services in the UK by different migrant groups.

In the first instance research activities will include an analysis of routinely collected data and a systematic review. This project is a new strand of work within the Avoiding Attendance and Admission Theme which is designed to be a feasibility study into a larger study towards either grant capture or PhD proposal. This project will strengthen existing themes of work in the area of ethnicity and health inequalities.

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Mental health nurse triage for Ambulance Service patients with mental health problems

An RCF funded collaborative project between the School of Health and Related Research and Yorkshire Ambulance Service is exploring the care provided for 999 patients with mental health problems. This includes a pilot study evaluating mental health nurse triage within the Emergency Operations Centre where calls are handled. This new service provides front-line call-handlers, clinicians and patients with access to specialist mental health support. The aims of the evaluation are to assess the impact of the service on outcomes for patients and on the working practices of Ambulance Service staff. It will also examine the costs and benefits associated with the service and any lessons learned from its implementation.

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Analysing Emergency and Urgent Care System Demand in Yorkshire and Humber: A data linkage study of pre-hospital and emergency department data.

Meet Saleema Rex, Data Specialist, Data Manager

I am the data specialist working on this data-linkage study. I manage the data we receive from multiple data sources. I review the data supplied and take necessary steps to remove personal identifiable information to ensure that patient confidentiality is maintained. I link ambulance data, A&E data and in-patient data to piece together a patient's journey through different services. I work with the study team to form algorithms such that we can identify key elements that can be used to categorise the patient's attendance. I clean and standardise the data to make it easy to analyse and come to meaningful conclusions.

Saleema Rex [s.rex@sheffield.ac.uk]



RELATED PUBLICATIONS in 2015

- **O'Hara, R., Johnson, M., Siriwardena, A. N., Weyman, A., Turner, J., Shaw, D., . . . Shewan, J. (2015).** A qualitative study of systemic influences on paramedic decision making care transitions and patient safety. *J Health Serv Res Policy*, 20(1 Suppl), 45-53. doi:10.1177/1355819614558472*
- ***rated as the most read paper on the publisher's website during May 2015.**
- **Abdulwahid, M. A., Booth, A., Kuczawski, M., Mason, S.M. (2015).** The impact of senior doctor assessment at triage on emergency department performance measures: systematic review and meta-analysis of comparative studies. *Emerg Med J*. 0:1-10. doi:10.1136/emered-2014-204388
- **Pickering, A., Harnan, S., Cooper, K., Sutton, A., Mason, S., & Nicholl, J. (2015).** Acute ischaemic stroke patients - direct admission to a specialist centre or initial treatment in a local hospital? A systematic review. *J Health Serv Res Policy*. doi:10.1177/1355819615586006
- **O'Hara, R., Johnson, M., Hirst, E., Weyman, A., Shaw, D., Mortimer, P., . . . Siriwardena, A.N. (2015).** Decision making and safety in ambulance service transitions. *Emerg Med J* Vol. 32 (pp. e2). England. doi:10.1136/emered-2015-204880.4
- **Chatters, R., Mason, S., Snooks, H., & SAFER 2 team. (2015).** Development of complex intervention in emergency care of falls for evaluation: implementation of the mrc guidance. *Emerg Med J*, 32(5), e10-e11. doi:10.1136/emered-2015-204880.28
- **Johnson, R., Kuczawski, M., & Mason, S. (2015).** Why is it so difficult to recruit patients to research in emergency care? Lessons from the AHEAD study. *Emerg Med J*. doi:10.1136/emered-2014-204401
- **Pickering, A., Cooper, K., Harnan, S., Sutton, A., Mason, S., & Nicholl, J. (2015).** Impact of prehospital transfer strategies in major trauma and head injury: Systematic review, meta-analysis, and recommendations for study design. *Journal of Trauma and Acute Care Surgery*, 78(1), 164-177. doi:10.1097/TA.0000000000000483

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