



AVOIDING ATTENDANCE AND ADMISSION in Long Term Conditions

NEWSLETTER Issue 3
March 2016

This is the 3rd newsletter for the NIHR CLAHRC YH Avoiding Attendance and Admission theme. In this edition we update you on progress with our big data studies. A key aim of our theme is to create a database of emergency and urgent care episodes, linking data from time of call to the emergency and urgent care system through to discharge from hospital. We now have data collected from all acute trusts in Y&H and are currently linking the data. Our work with Hospital Episode Statistics Data is also progressing well and we are now working with a definition of unnecessary attendances. In this issue we introduce Richard Jacques who is our theme statistician and who is analysing both our large datasets.

We also introduce a new study which is linked to our theme – a study investigating reasons for patients attending the ED, funded by the BMA. In addition, in this issue you'll find updates on the progress of five studies closely related to the overall theme: pre-hospital mental health nurse triage; senior doctor triage improvement; GP services located in the ED; management of frequent attenders to ED; migrant use of emergency services and also some exciting developments with presentations and talks at national conferences.

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Research Fellow, AAA Theme Manager

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

Emergency and Urgent Care System Demand in YH: A retrospective analysis of routine data



Meet Dr Richard Jacques, Research Fellow, Statistician:

I am the statistician working on the study analysing emergency and urgent care system demand. The aim of my work is to use routinely collected data to describe a profile of patient demand across the Emergency and Urgent Care system. Currently I am analysing three years of A&E Hospital Episode Statistics (HES) data to identify trends in the number and type of patients that attend Emergency Departments. In particular, I have been using data collected on treatments and investigations to identify patients who may have attended A&E unnecessarily. I am also working on HES Admitted Patient Care Data so that we can identify trends in the number and type of patients who are admitted to hospital in an emergency and if these admissions are necessary.

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Data linkage studies highlights:

- A database of over two million emergency and urgent care episodes has been collected from all acute trusts in YH. Linking episodes across pre-hospital and hospital providers is underway. Analysis will map the patient journey from time of call through to discharge from hospital and identify the potential for interventions along the pathway of care.
- A Data Analysis Group has been set up, with members of the Theme Advisory Group and additional stakeholders. Two rounds of discussion and prioritisation were held. A stakeholder conference is planned for 2016/17 to prioritise service redesign work for years 4 & 5.

Saleema Rex, Data Specialist, Data Manager: *Currently I've imported all the datasets we have received and I am in the process of linking the combined hospital datasets with the 999 and NHS111 datasets.*

Saleema Rex s.rex@sheffield.ac.uk



New projects:

A prospective study of urgent care utilisation in the NHS (01 Feb 2016 – 30 Sept 2016)

A consultancy project funded by the **British Medical Association (BMA)** has recently started to describe patient reasons for attending the Emergency Department (ED). This study will undertake surveys in a number of EDs and will include a series of brief interviews with clinical staff to understand their perspective on why patients attend the Emergency Department. The study is currently in set up and pilot work is underway in Sheffield.

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

Sarah is undertaking a systematic review to look at migrants' use of emergency services as compared to non-migrants. Findings will guide the development of a PhD research proposal for empirical work in the area.

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Susan Croft, EM consultant at Northern General Hospital and AAA Theme Advisory Group member presented a talk '**Beyond the Directory - the Sheffield Model**' at the Annual Conference for Ambulatory Emergency Care, October 2015 in London. She discussed some of the challenges developing Ambulatory Emergency Care in a large, split site, super-specialised Trust and how they have gone beyond the traditional clinical pathway model of Ambulatory Emergency Care to assess and measure further opportunities.

AHSN Improvement Academy Urgent Care Theme: Improving the speed and appropriateness of treatment in EDs using evidence-based methods such as Senior Doctor Triage

After visiting nearly all hospital emergency departments (EDs) in the YH region, we now have an understanding of how the EDs operate and the many different triage processes in place. There were some great examples of general good practice and successful senior doctor triage models identified. The Urgent Care team are now supporting staff in York Hospitals NHS Foundation Trust to improve their ED triage models. Through staff collaboration, culture change and focus on patient safety priorities, senior doctor triage (York Hospital) and Advanced Nurse Practitioner triage (Scarborough Hospital) are going to be implemented over a phased period and patient waiting times measured.

Maxine Kuczawski m.kuczawski@sheffield.ac.uk, Programme Manager

Reducing frequent attendance in Emergency Care through improving care pathways

This study has examined whether more appropriate support and services can be provided for people who attend emergency care services frequently, particularly where health related anxiety may be influencing their attendance.

Interviews were conducted with 10 ED staff working for Sheffield Teaching Hospitals and 2 GPs working in the Sheffield area. From analysis of the interviews healthcare staff identified 3 groups of frequent attenders. Those with (1) Long-term conditions (2) Chaotic lifestyles and (3) Health related anxiety. Suggestions were made with regards to how these patients could be better managed in the future. Papers are being prepared for publication.

Suzanne Ablard s.ablard@sheffield.ac.uk

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

Surveys and interviews have been used in YH to establish the proportion of EDs across the region that have co-located primary care services, the types of models in operation and any barriers and facilitators to the success of these services.

Qualitative interviews in selected sites showed that the level of integration of primary care services with ED, referral processes in hospital and sustainability were key factors to consider in implementing co-located primary care services. A report on the study is now available.

Please contact *Suzanne Ablard* s.ablard@sheffield.ac.uk for more information.



Poster '**Evaluation of a Triage Intervention for Ambulance Service Patients with Mental Health Problems**' won best prize for 'research most likely to affect practice' at EMS999 Research Forum Conference 2016 in Newcastle.

(*Andy Irving, Rachel O'Hara, Maxine Johnson - University of Sheffield; Angela Harris, Kieran Baker - Yorkshire Ambulance Service NHS Trust*)

Pilot evaluation of mental health nurse triage for Ambulance Service patients with mental health problems

A collaborative theme project with the Yorkshire Ambulance Service has evaluated a pilot study of mental health nurse triage within the Emergency Operations Centre. The evaluation assessed the impact of the service on outcomes for patients and on the working practices of Ambulance Service staff.

Findings: Interviews revealed the developmental process and challenges involved in implementing the initiative. Staff perceived initial benefits in relation to the delivery of more appropriate patient care and reduced anxiety for staff managing calls that now have access to specialist support. *Rachel O'Hara* R.OHara@sheffield.ac.uk

RELATED PUBLICATIONS in 2015

- Primary care services located with Emergency Departments – a review of effectiveness S Ramlakhan, S Mason. Manuscript ID emermed-2015-204900.R2 (in press)

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Visit our web page: <http://clahrc-yh.nihr.ac.uk/our-themes/avoiding-attendance-and-admissions-in-long-term-conditions>

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