Redesigning care pathways for frequent attenders

Cardiff and Vale University Health Board

The challenge
Cardiff and Vale University Health Board and the Welsh Ambulance Service NHS Trust (WAST) provide care to segments of the population that access unscheduled healthcare services frequently and proportionally more often than the rest of the local community.

This percentage of service users, referred to as frequent attenders, require a significant amount of resources and time. This is often disproportionate to their actual emergency need, but there is recognition that they are in need of input from health and social care agencies.

At first, independent streams of work coexisted and began to reduce the demand these patients placed on services. But it became obvious that there was an overlap of work with the emergency department, out-of-hours services and the ambulance service, sharing an average 45 per cent of all frequent attenders and a further 25 per cent known to two or three services.

What was done
A project started to integrate the health agencies’ work. This was then extended to key partners from local authority, third sector agencies, homelessness services, the criminal justice system, GPs and others to provide a comprehensive and collaborated response to the needs of frequent attenders in the Cardiff and Vale area.

A key worker was assigned to each frequent attender, dependent on their need, such as social isolation, housing, older person’s services or a debt agency.

The wide-reaching abilities of the multidisciplinary and multi-agency team helped to solve real-time problems for patients. The project is unique in its membership, with 16 agencies represented at meetings, spanning from the Health Board to local projects such as community gardens and cafes.

The team is also able to feed into a further layer of support agencies, putting the individual directly in the centre of care, and promoting independence and reintegration into the local community.

The initial changes were ones of communication and information sharing.
The NHS Confederation is the only membership body that brings together and speaks on behalf of the whole NHS.

The results
Attendance at emergency departments is down, as are associated costs. The outcome for frequent attenders is that they feel they are being supported in their time of need.

Although unnecessary emergency responses are reduced, an individual is in fact being supported to reach the best possible solution to their needs, in conjunction with community projects and services.

Overcoming barriers
The aim of the work was for frequent attenders to be integrated into local community support, and so it was crucial for the third sector, local authority, GPs, criminal justice system and other support agencies to be on board from the beginning.

This meant developing and implementing an information-sharing policy to ensure compliance with all data protection legalities and confidentiality clauses.

The tri-partite cornerstone of the emergency department, out-of-hours service and the Welsh Ambulance Service brought three years of independent frequent attender work together. This helped to build a strong knowledge base of what worked for this section of the community.

Initially, seven patients were put into a pilot study and the findings were then extrapolated so that others could join the project. Case studies were used to show all agencies the benefit of changes, using the premise of the empirical/rational change management strategy that if the change can be shown as desirable, and with an equal emphasis on their gain, the agencies would be more likely to join the collaboration.

It was noted that each agency was investing a lot of resource and energy into a small number of patients, and that with the combined knowledge and support for the work, this could be reduced with minimal effort from any one individual. The gain is that the patient would be cared for through the correct pathway and the agencies’ financial and staff resources would be reduced.

Key learning
- There is a need for a clear mission statement to allow ideas from different agencies to be aligned.
- It is critical to clarify the intent of the scheme to enable the burden of work to be shouldered equally among the agencies, rather than pushing a workload onto already overstretched services.
- Overcoming years of organisational boundaries and silo working has been key to the success of the project. Where agencies have been energised by the project, it has been easy to overcome bad habits and put the frequent attender at the centre. In areas where these habits are deeply engrained, it has been more difficult to ‘sell the initiative’.

Takeaway tips
The wealth of experience and knowledge from the many agencies contributing to the project helps with the development of care plans.

Collective ‘thinking outside the box’ means patients get the best care based on a full disclosure of information. Evidence shows that having a collaborative and consistent approach to care planning benefits both the patient and the service alike.

For more information
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