

The Cost of Alcohol Frequent Attenders: Staging an Intervention

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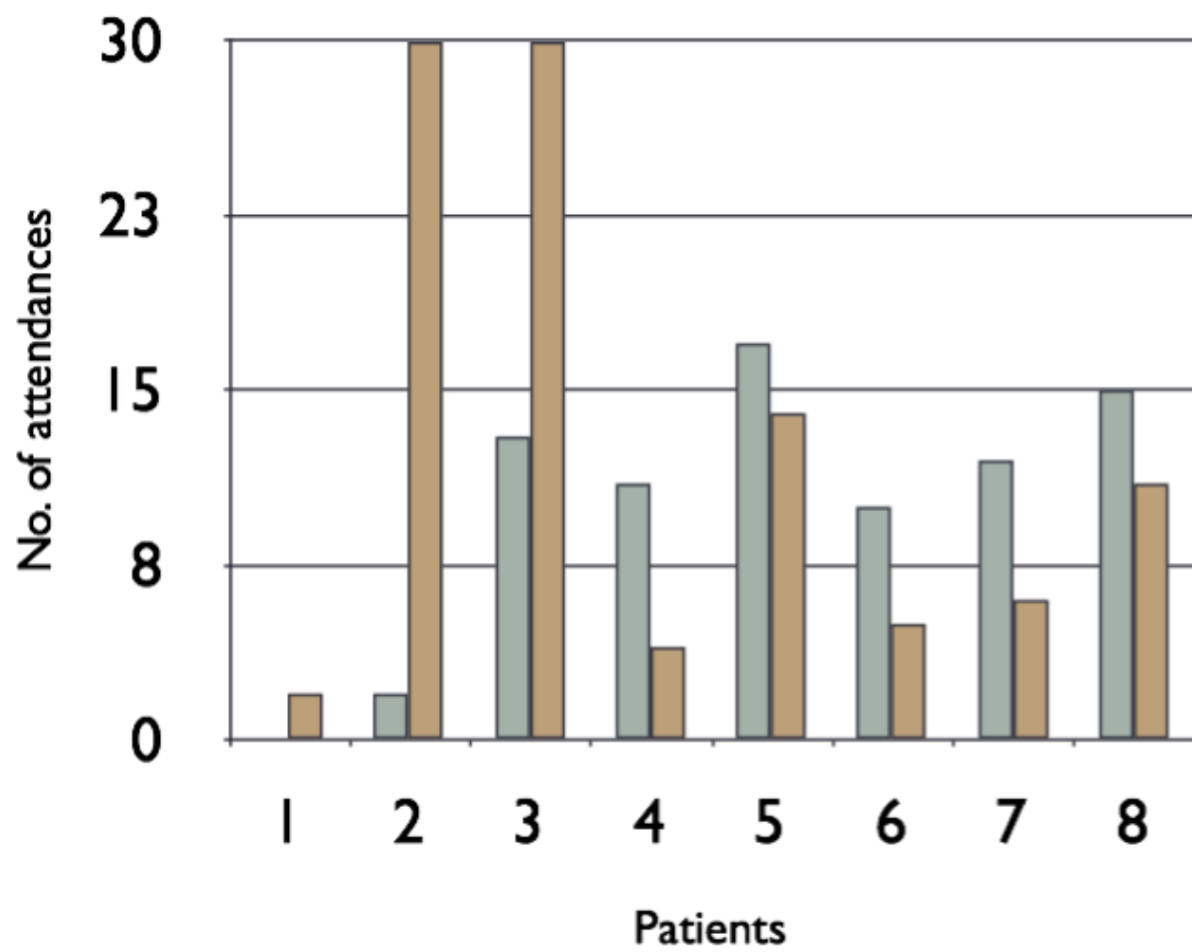
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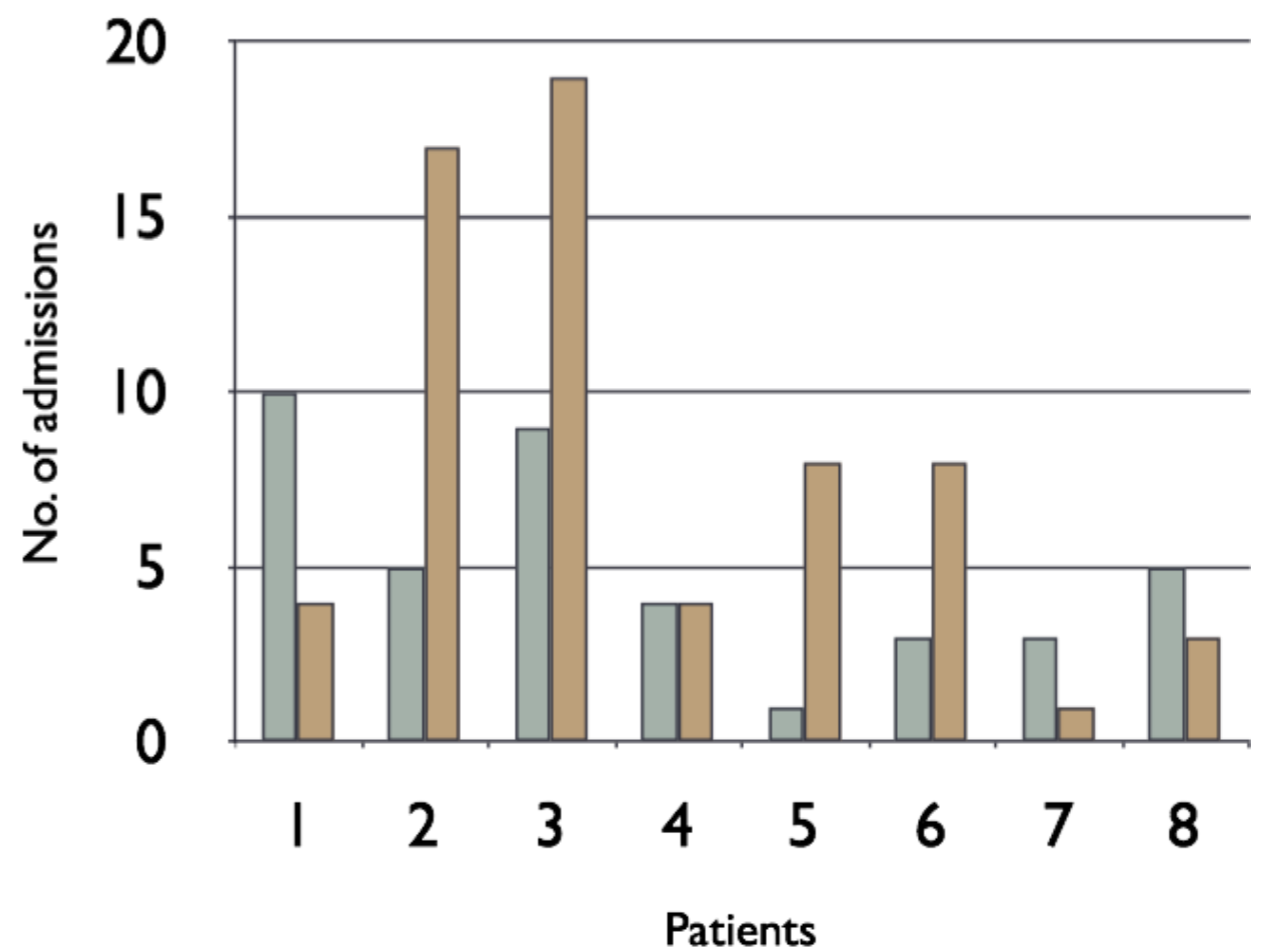
Background

- Alcohol related harm is estimated to cost Health and Social Care (HSC) in Northern Ireland £250 million annually.¹
- A previous audit of all referrals to the alcohol liaison service in the Belfast Trust in a six month period (Feb to Sept 2014) revealed that of these 176 referrals:
 - Eight (4%) patients contributed 31% of attendances and admissions.
 - These individuals had at least 10 ED attendances or hospital admissions in the 6 months before or after a brief alcohol liaison nurse consultation.²

ED attendances



Hospital Admissions



Before ALN
After ALN

Aim

- To evaluate the financial cost of attendance and admissions of these 8 frequent attenders in one year.

Methods

- The frequent attenders' records were reviewed to obtain:
 - the number of ED attendances
 - number of hospital admissions and length of stay
- Over a 12 month period
- Coding and discharge summaries were reviewed to assess the reason for admission and if alcohol had contributed.
- Costing estimates were obtained from the department of health.³

Results

- In a single year the 8 patients:
 - attended ED on 182 occasions
 - accounted for 104 admissions
 - occupied 231 hospital bed days (Mean 2.2, median 1, range 1-74)
- Of the 104 admissions:
 - 71 admissions were directly related to alcohol.
 - Alcohol was a probable contributing factor in a further 28.
- Based on average cost of ED attendance of £114 and hospital bed day of £273, these 8 patients in one year cost the HSC £83,811. ³

Intervention

- A small cohort of patients has been highlighted with recurrent alcohol related presentations and admissions, suggesting that current intervention attempts are insufficient.
- Salford Royal Hospital have set up an Alcohol Assertive Outreach Service, which may be part of a solution for these patients.
- It resulted in a net saving of £256,500 in its second year.⁴
- It resulted in a 59% reduction in Emergency Department attendances and a 66% reduction in average monthly hospital admissions.⁴
- Christo inventory for substance misuse services (CISS) scores fell from 11 preintervention to 8 postintervention.⁵

Alcohol Assertive Outreach Team

- Concept from field of psychiatry - to engage poorly compliant patients.
- MDT with medical, psychiatric, substance misuse, psychology, nursing and social work specialists.
- National database identifies top 30 frequent alcohol-related attenders. The team case manages them in community for 6 months.
- Also work proactively with any who have had 2 alcohol-related admissions within a short period of time.
- Input involves personalised care plans, with assertive approaches such as repeat phone calls and home visits.
- Common strategies include fast access to alcohol detoxification; appropriate referral to outpatient specialties and support in getting there; psychological support; facilitating housing solutions; and robust responses to violence and aggression.⁵

Long Term Impact

- Between January 2013 and October 2015, the Alcohol Assertive Outreach Service in Salford has continued to reduce alcohol-related Emergency Department attendances and hospital admissions by 60-70%. ⁴

Conclusion

- A small cohort of chaotic patients with alcohol dependence have the potential to cause a massive health economic impact.
- The establishment of alcohol assertive outreach teams (AAOTs) within Northern Ireland has potential to allow intensive case management of patients with multiple alcohol-related attendances, leading to:
 - a reduction in alcohol-related attendances and admissions
 - a financial saving
 - improved patient care.

Conclusion

- BHSCT have plans to commence an AAOT in June 2016 with 2 outreach workers supplied by Addiction NI.



References

- 1 Public Health Agency/Health and Social Care Board. Draft Alcohol and Drug Commissioning Framework for Northern Ireland 2013-16 (Consultation Document). Available online at:[<http://www.publichealth.hscni.net/alcohol-and-drug-commissioning-framework-northern-ireland-2013-16>]
- 2 Clarke E, Adams K, McCorry R. Does the Alcohol Liaison Nurse Service in the Belfast Trust impact on ED attendance and hospital admissions? *Irish Society of Gastroenterology*. 2015. Available from: [<https://www.isge.ie/abstracts/view/93>]
- 3 Department of Health. Reference Costs 2012-13. Available from: [https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/261154/nhs_reference_costs_2012-13_acc.pdf]
- 4 The British Society of Gastroenterology and Bolton NHS Foundation Trust. Alcohol care teams: reducing acute hospital admissions and improving quality of care. Feb 2011. Available from: [<https://www.nice.org.uk/localPractice/collection>]
- 5 Hughes NR, et al. Salford alcohol assertive outreach team: a new model for reducing alcohol-related admissions. *Frontline Gastroenterology*. 2013;0:1-5.