

UNSCHEDULED ATTENDANCE

GOVAN SHIP PROJECT
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Case Example - Superuser

- 40 A&E attendances in 3 months before identified by Govan Ship
- Identified and coded as Govan Ship with patient consent
- Multi disciplinary meetings to develop Joint Anticipatory Care plan
- A&E, Psychiatry, Police, Housing and Social Work all had input
- Plan agreed and disseminated
- Weekly extended consultation arranged in Primary Care

3months after plan initiated ... 16 A&E attendances
Subsequent 3 months ... 5 A&E attendances

WHERE TO GO?

- GP
- GEMS
- LOCAL PHARMACY
- MINOR INJURIES
- OPTICIANS
- ACCIDENT & EMERGENCY



Redirection Policy Audit

- 4 practices in Govan Health centre reviewed all A&E attendances over 7 days
- Patient population 20,000
- 20 potential redirection cases identified
- Feedback to A&E and agreement patients appropriate for redirection
- Small impact for General Practice... 5 cases per week per practice
- If policy adopted on large scale, significant impact possible on A&E
- Aim is re-education of patients' on best use of services

Initial Planning A&E Attendances

- **Superusers** Over 6 six A&E attendances over 1 year
Developing Anticipatory Care plans via Multi-disciplinary approach
- **Redirection** Joint Management strategy between Primary Care and A&E
Agreement on Targeted Patient Group
Inappropriate attendances to A&E redirected back to Primary Care
Protocol developed, patients contacted by General Practice by 11am next working day

What Next ?

- Expansion of Redirection Policy ?
- Development of ACPs for all frequent A&E attenders as clinically appropriate

