



CLEAR High Intensity User 2022

Hyde Primary Care Network

Providing holistic, proactive, long term care for high intensity users of primary care

AT A GLANCE

CLEAR CHALLENGE

High intensity users taking up a disproportionate amount of GP and hospital time – accounting for 15% of the PCN's ED attendances and 8% of unplanned admissions

KEY CHANGES

A new HIU service to proactively care for patients with long-term conditions including wellbeing and psychological support, with data and admin support to measure outcomes

FORECAST BENEFITS

Improvement in the overall wellbeing of HIUs, enhanced access to community-based support, reduction in health inequalities and potential annual productivity savings of £143,809

THE CHALLENGE

More than 60% of the PCN's population were living in some of the most deprived areas in England and life expectancy was below the national average.

The PCN had a higher than average percentage of high intensity users (HIUs) – patients attending the emergency department five or more times in the last 12 months. The 228 HIUs represented 0.6% of the PCN's 35,958 registered patients (with appointments) but accounted for 15% of all A&E attendances and 8% of all emergency admissions.

Their levels of anxiety and depression, hypertension, asthma and depressive dementia were all higher than the general patient population.

WHAT WE DID

The team identified patients with more than five ED attendances between August 2020 and July 2021 and compared this HIU group with all patients needing care in the same period, using PCN data. Initial analysis focused on demographic details, distribution and comorbidities.





CLEAR RECOMMENDATIONS

A new MDT HIU service to proactively care for patients with long-term health conditions.

The service would provide coordinated care including wellbeing and psychological support to address the wider determinants of health enabling patients to stay independent and healthy, both physically and mentally, for as long as possible. They would receive support and advice on benefits, budgeting and housing. Data and administrative support would ensure the right people benefitted and outcomes were monitored.

To work out the new model of care, Hyde developed a matrix to capture their activity and workforce needs to improve care. This helped them to explore the skills and roles needed and quantify them, determining the exact number of hours required to deliver each element of care. Holistic care for high intensity users will improve their health and quality of life. Early interventions for this vulnerable group of people will reduce the number of crisis points when they have nowhere else to go except the ED.

FORECAST IMPACT

Holistic, proactive and coordinated care for HIUs would help to address health inequalities, improve access to community-based support and enhance the overall wellbeing of patients.

These new measures would lead to significant reductions in GP appointments, ED attendances and emergency hospital admissions for HIUs which cost £692,244 between August 2020 and July 2021. Estimated annual productivity savings of £269,909 could be achieved by a 20% reduction in GP appointments (179 patients), 40% reduction in ED attendances (622 patients) and 40% reduction in unplanned hospital admissions (27 patients).

The cost of the new model of care would be £126,100, so annual savings of £143,809 could be achieved. Five of the new staff roles fall within the Additional Roles Reimbursement Scheme (ARRS) so these costs could potentially be partially reimbursed.

