

DEEP END SUMMARY 31

Attached Alcohol Nurse Deep End Pilot (July 2015–2016)

- The Attached Alcohol Nurse Deep End Pilot (July 2015-2016) tested a service model of partnership working by bringing specialist community services into Deep End general practice settings.
- Its aim was to address the needs of people with problem alcohol use who are in contact with their general practices but who have not previously engaged well with addiction services.
- Two FTE specialist Band 6 addiction nurses were attached to six Deep End practices in NW Glasgow working in partnership with the general practice team.
- 132 patients were referred, 71% of those agreed to be seen, and 82 patients had specialist alcohol assessment and treatment in the pilot.
- The profile of the patients in the pilot bore a striking resemblance to the profile of people described in a recent in-depth study of alcohol related deaths in Glasgow.
- Associations of improved outcomes beyond engagement in alcohol care were not feasible due to the short time scale and size of the pilot.
- All professionals involved in the pilot were unanimous – it was welcomed and successful.
- The theory of change was:
 - The team relationship and function that built up between the GP practices and attached alcohol nurses. Vital to this was informal discussion and recording in GP notes.
 - The engagement strategies the nurses used with patients – described as responsiveness, ‘stickability’ and flexibility.
- Recommendations for the future are:
 - The pilot should be repeated at scale in Deep End practices for a period of three years with a programme evaluation resourced and embedded in service delivery which will include feedback from patients.
 - This should be delivered by specialist senior alcohol nurses embedded in general practices providing the full range of alcohol treatment services using GP recording systems and with a team working approach.
 - Delivery of care should be characterised by these key ingredients for patient engagement – responsiveness, ‘stickability’ and flexibility.

“General Practitioners at the Deep End” work in 100 general practices, serving the most socio-economically deprived populations in Scotland. The activities of the group are supported by the Scottish Government Health Department, the Royal College of General Practitioners, and General Practice and Primary Care at the University of Glasgow.

Full report available at <http://www.gla.ac.uk/deepend>

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