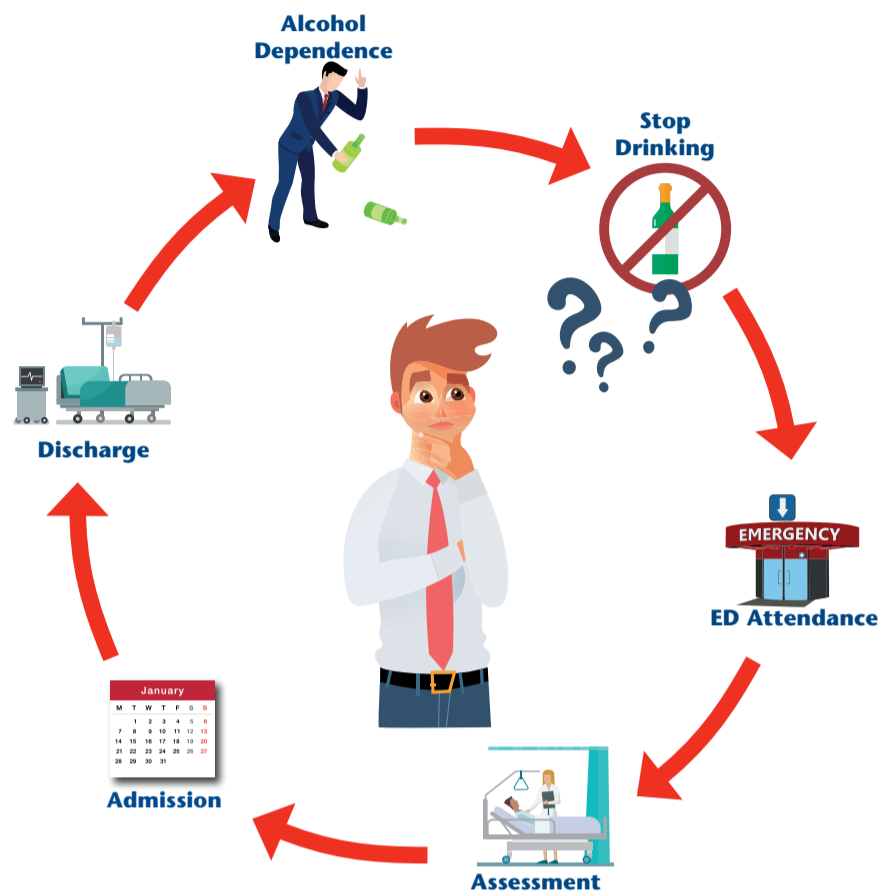


Alcohol withdrawal Risk stratification Tool (ART): Redesigning the Care Pathway for Patients at Low Risk of Severe Alcohol Withdrawal

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Descriptor

There are patients in NHSGGC that frequently attend hospital with Alcohol Withdrawal Syndrome (AWS) and admitted just in case they develop Severe Alcohol Withdrawal Syndrome (SAWS). However, a large percentage of these patients do not develop SAWS and are discharged within 48 hours of admission. Although this group of patients may be known to Alcohol & Drug Recovery Services (ADRS) they do not engage well with community services and were identified in the alcohol deaths report (2016) as high risk of an alcohol related death. Therefore, by redesigning the pathway for patients admitted to hospital with AWS and identified as low risk of SAWS using the newly developed Alcohol withdrawal Risk stratification Tool (ART) there is an opportunity to engage patients with the ADRS at a time of need as opposed to availability with the aim of prolonging life.

Methodology

The ART is a risk stratification tool developed in three stages

Stage 1: A systematic literature review to identify the variables linked to SAWS development.

Stage 2: A Cohort study to investigate which of these risk variables were statistically significant (Spearman's rank correlation) in SAWS development in NHSGGC.

Stage 3: The development of the ART (Logistic regression) containing the Glasgow Modified Alcohol Withdrawal Scale (GMAWS) and Fast Alcohol Screening Test (FAST)

Stage 4: The acute addiction liaison nursing service (AALNS) prospectively tested the ART on patients referred to them from the Immediate Assessment Unit (IAU) and Acute Assessment Unit (ARU) at the QEUH (21/01/2019-22/02/2019) to identify patients at low risk of SAWS (GMAWS < 4).

Aims / Objectives

- To develop an alternative treatment plan to hospital admission for patients identified as low risk of SAWS using the ART.
- Build relationships with stakeholders for safe, effective collaborative working.
- Provide a safe, holistic/ early identification approach to the treatment and support of patients experiencing mild- moderate alcohol withdrawal.
- Re-design service response to provide a home supported detoxification at time of need.

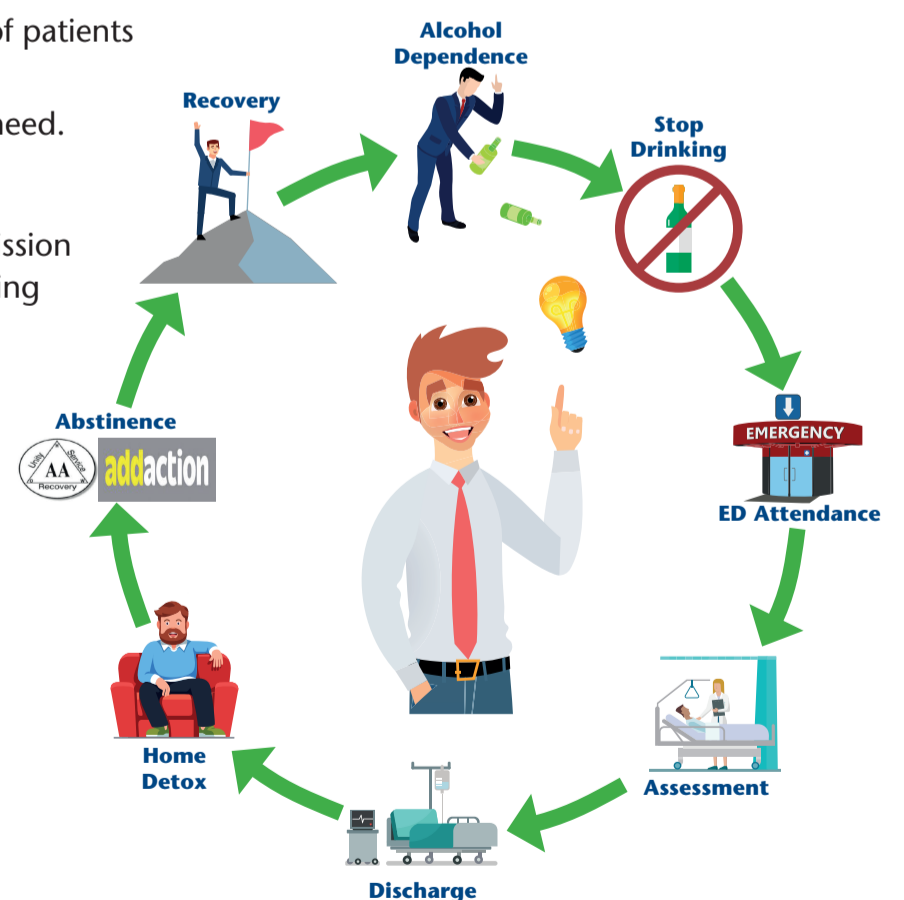
Outcomes

The ART identified Forty four patients as low risk of SAWS with a mean length of admission of 4 days. Forty two (95%) patients did not develop SAWS (GMAWS \geq 4). A crude costing estimate of admission versus home supported detoxification for these patients over 12 months (ISD Scotland, n.d) was calculated.

- Cost of hospital detoxification= £1,179,130
- Cost of home supported detoxification= £277,062

The service consultation resulted in:

- A robust pathway from the Immediate Assessment Unit (IAU) and Acute Assessment Unit (ARU) to the ADRS.
- Commencement of a home supported detoxification programme within 24 hours of hospital discharge.



References

Dargan, S., Priyadashi, S., Martin, T. & Ritchie, T. (2016). Alcohol Related Deaths in Glasgow: A Cohort Study 2013. Available from https://www.nhsggc.org.uk/media/240118/alcohol_related_deaths_glasgow_city_cohort_2013.

ISD Scotland (nd). Scottish Health Service Costs (online). Available from <http://www.isdscotland.org/Health-Topics/Hospital-Care/bed>.

Greater Glasgow & Clyde Acute Addiction Action Plan