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NHS Lothian
Rapid Response Team

A Nurse Led Alternative to Psychiatric Admission

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Why was it set up?

- NHS 2020 vision (Scottish Government, 2011) emphasises recovery in community as an alternative to hospital

- Build community capacity to ensure that those who do not require hospital can receive specialist care in their communities.

(Scottish Government, Alzheimer Scotland, 2018)

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Why was it set up?

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- New Royal Edinburgh Building opened summer 2017; reducing older peoples mental health bed numbers by 20

- The population of people in Edinburgh over 65 is predicted to rise from 77, 000 to 117,000 by 2041 (City of Edinburgh Council, 2018)

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Aims of the Service

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- Reduce hospital admissions
- Provide assessment and support for older people in mental health crisis in their own home
- Gate-keep all possible admissions
- Facilitate and support early discharge

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Addressing Inequalities

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- Bringing Older Adults Mental Health services in line with Adult Mental Health services
- Addressing the Mental Health Needs of the ageing population
- Working in partnership with GPs and Hospital at Home services to ensure holistic assessment
- Acting as advocates for patients dealing with other agencies

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Structure of the Service

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- Nurse-led flexible service
  - 1.0 WTE Senior Charge Nurse
  - 6.8 WTE Band 6 Mental Health Nurses
  - 6.0 WTE Band 5 Mental Health Nurses
  - 5.0 WTE Clinical Support Worker
  - 1.0 WTE Admin Support

- Funding for 0.8 WTE Social Worker

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Structure of the Service

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- 8am-5pm, 7 day service, 365 days a year.
- Response time is within 24 hours from referral
- Referrals taken via phone from GPs, CPNs, Consultant Psychiatrists, Psych Liaison, EBSS

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Pathways before RRT

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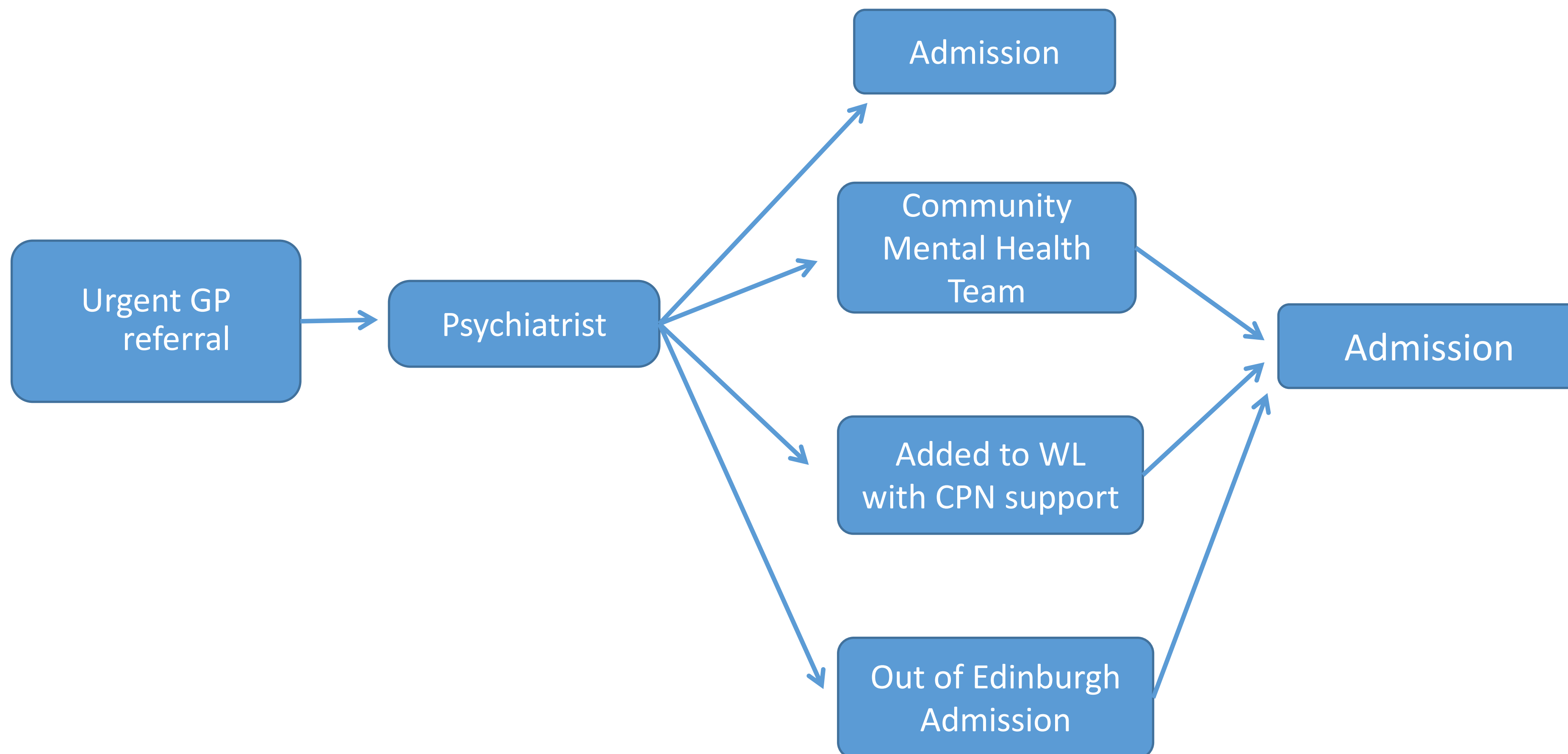

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Pathways now

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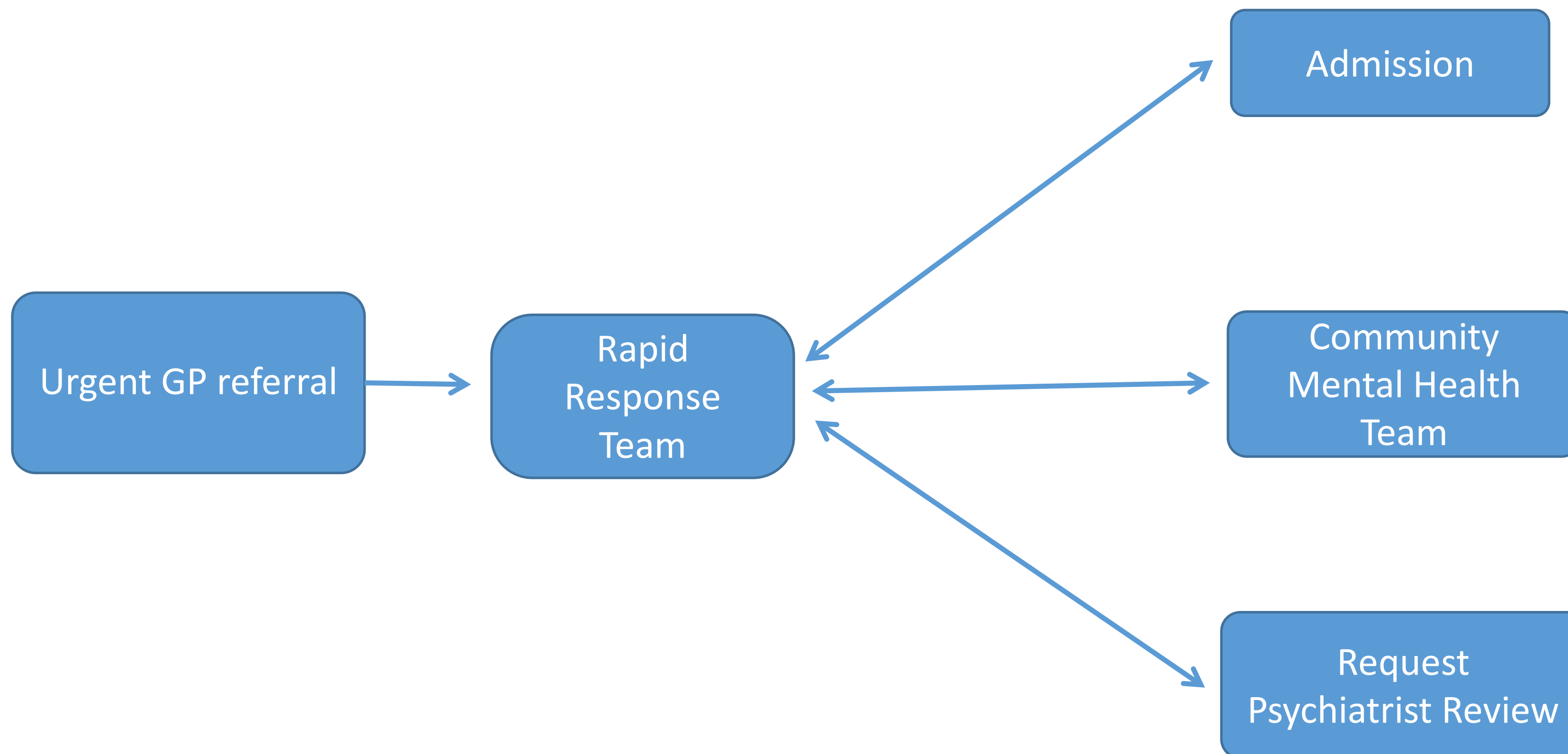

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Reason for Referral - 2018

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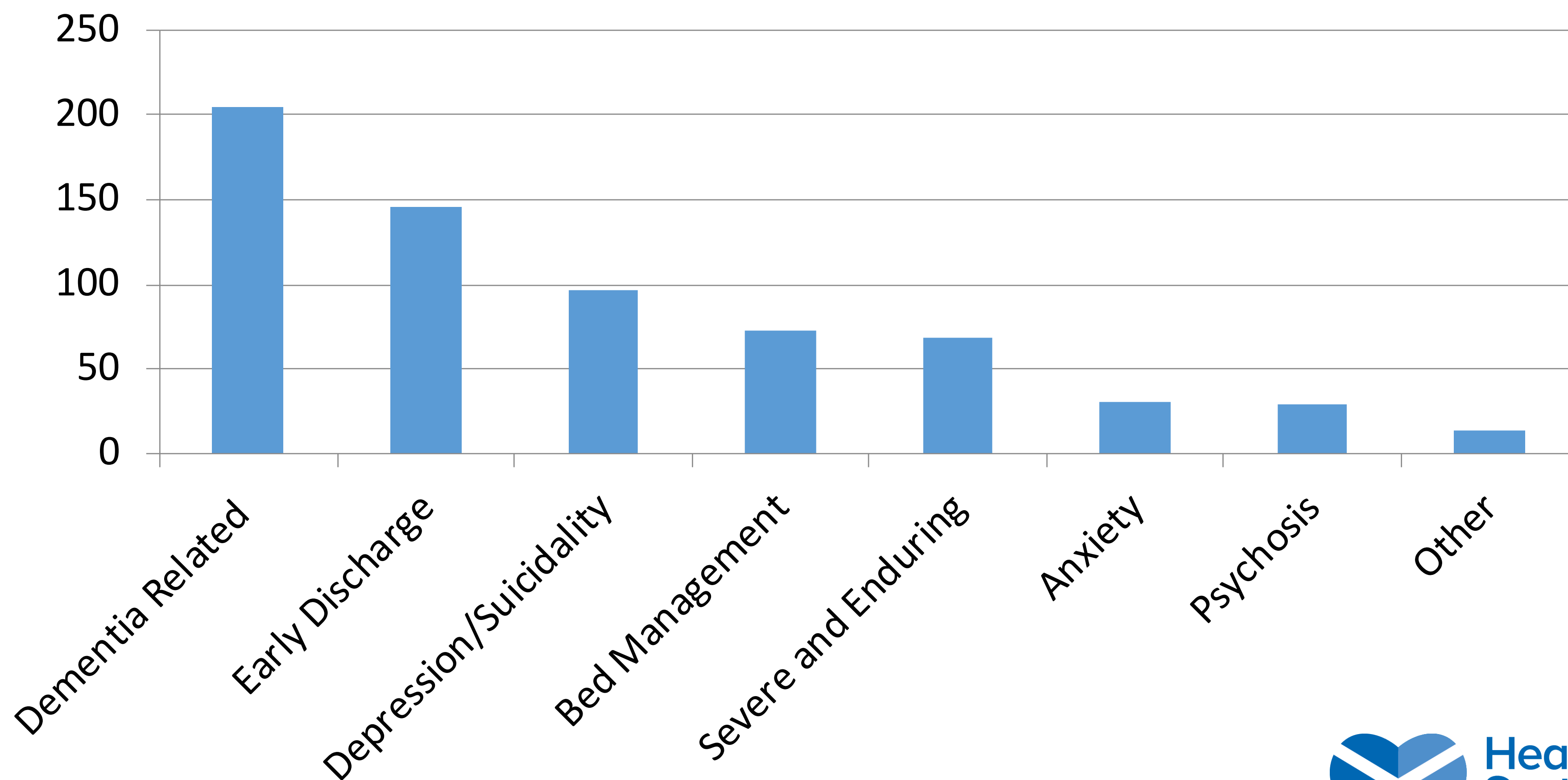

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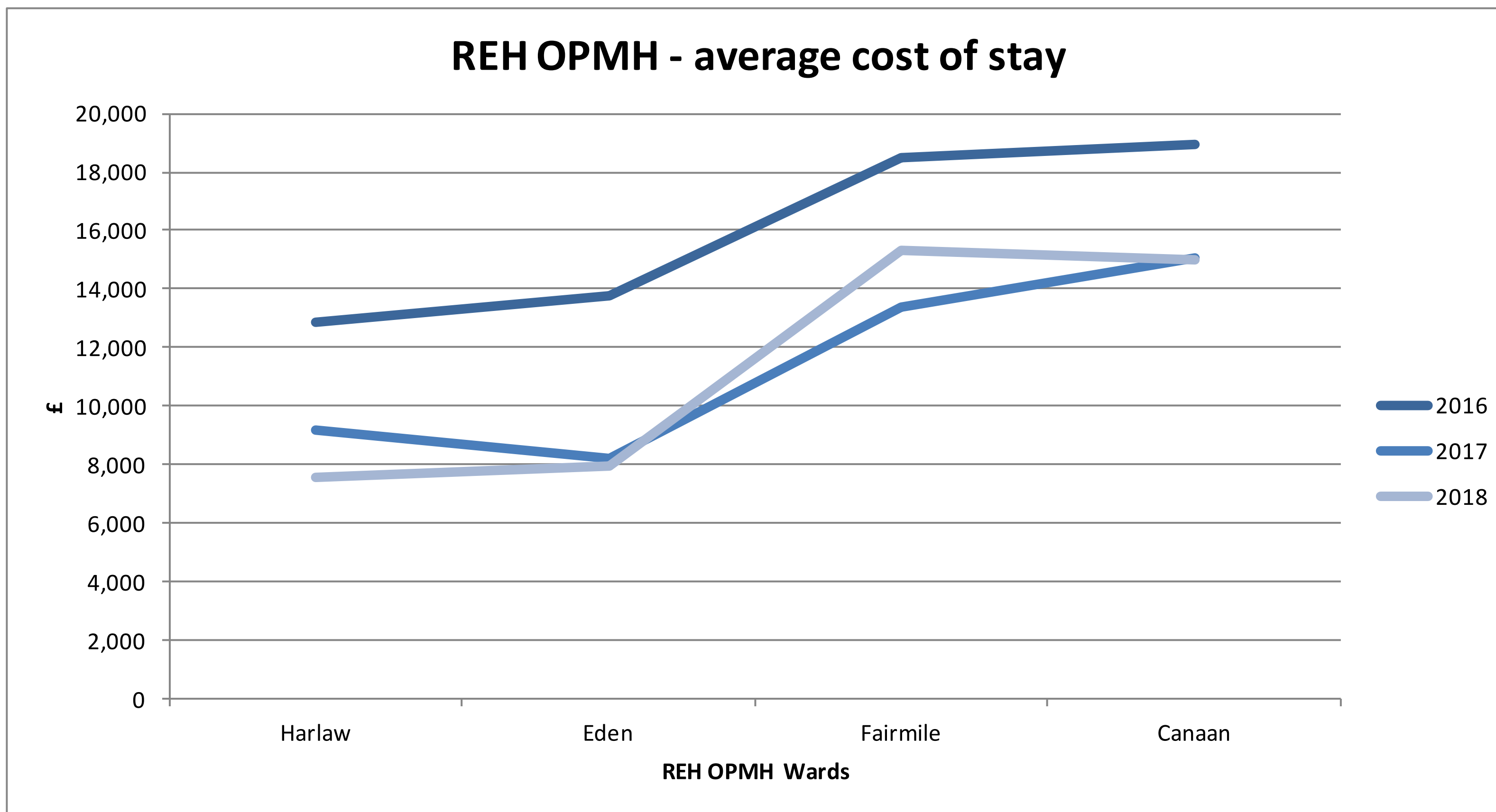
Financials



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It’s the Team Work that makes the Dream Work!

- Culture – Supportive and open
- Promoting ‘Joy in Work’
- Instilling confidence in complex decision making
- Flexibility
- Focus on developing the workforce
- Joint caseload supervision

Engagement with Other Services

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- LOOPs – Single point of referral into 3rd Sector
- Regular partnership working with Health & Social Care
- Talks in GP Practices
- Presenting at/attending conferences and networking events including local press coverage
- Protected learning time.

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Patient Outcomes - 2018

Admitted To Royal Edinburgh Building	215
Discharged to CMHT	163
Assessed and Unsuitable	117
Discharged to GP	97
Admitted to Acute General Hospital	25
Declined input from Rapid Response Team	10
Triaged as Unsuitable	9
Discharged to Edinburgh Behavioural Service	8
Other (Deceased/extradited/psychology)	5

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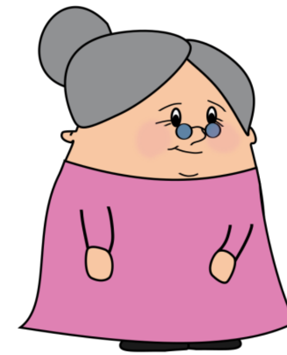
Patient Stories: Joe

- Referred by Liaison Psychiatry for admission, probable delirium
- Due to verbal aggression and agitation the ward was struggling to manage his distress
- Detained and commenced on antipsychotic medication
- Assessed by RRT for transfer but discharged home with RRT Support

Patient Stories: Joe

- Diagnosed with dementia and commenced on treatment
- No evidence of agitation, but many unmet social needs
- RRT working closely with Psychiatrist, housing, social worker, and third sector agencies.
- Discharged back to GP when package of care in place.

Patient Stories: Jane



- Referred by MOE Day Hospital due to suicidal ideation
- Had experienced an MI and sudden death of husband in short space of time
- Socially isolated, poor mobility
- Struggling with ADL's and financial matters

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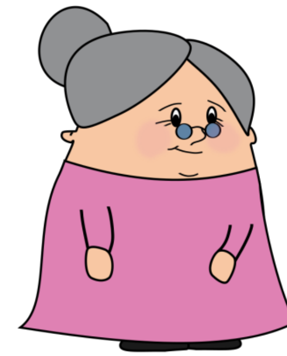
Patient Stories: Jane



- Assisted with shopping/basic household tasks while promoting independence
- Made urgent referral to Occupational Therapy and Social Work
- Referred to CRUSE bereavement support
- Mood improved without need for pharmacological intervention

Patient Feedback

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- RRT set up a free post PO Box address and sent out anonymous feedback forms to patients, carers and referrers.

The phone was always answered by someone who could make a decision and who informed me about my mother's care

I understand RRT is a new service, it's very successful, very quick to act, high quality staffed team, thank you very much

Marked improvement in my mother's stability, this was due to the caring, empathetic support of the RRT

The team and I got on splendidly in every way!

The team are very special people, and not just one or 2 but the 10 or 12 that helped me get to a better place in my life. Thanks also from my grandchildren!

The whole staff team are about making a difference; they are a can-do people who listen and act.

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What have we learned?

- Flexibility versus becoming overwhelmed
- Person centredness can be difficult
- Managing relationships with other teams
- Positive risk taking
- Admission does not mean we have failed

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Moving Forward

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- RRT dedicated social worker
- RRT part time Consultant Psychiatrist
- Ward Liaison Nurse
- RRT is an evolving service working to meet the needs of patients and their carers
- Increasing hours of the service

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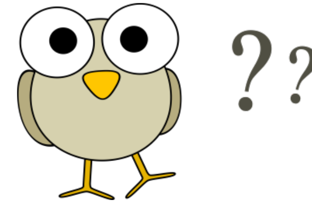
Any Questions?



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