



# Improving Access to Drug and Alcohol Treatment

NHS Forth Valley, Substance Use Service

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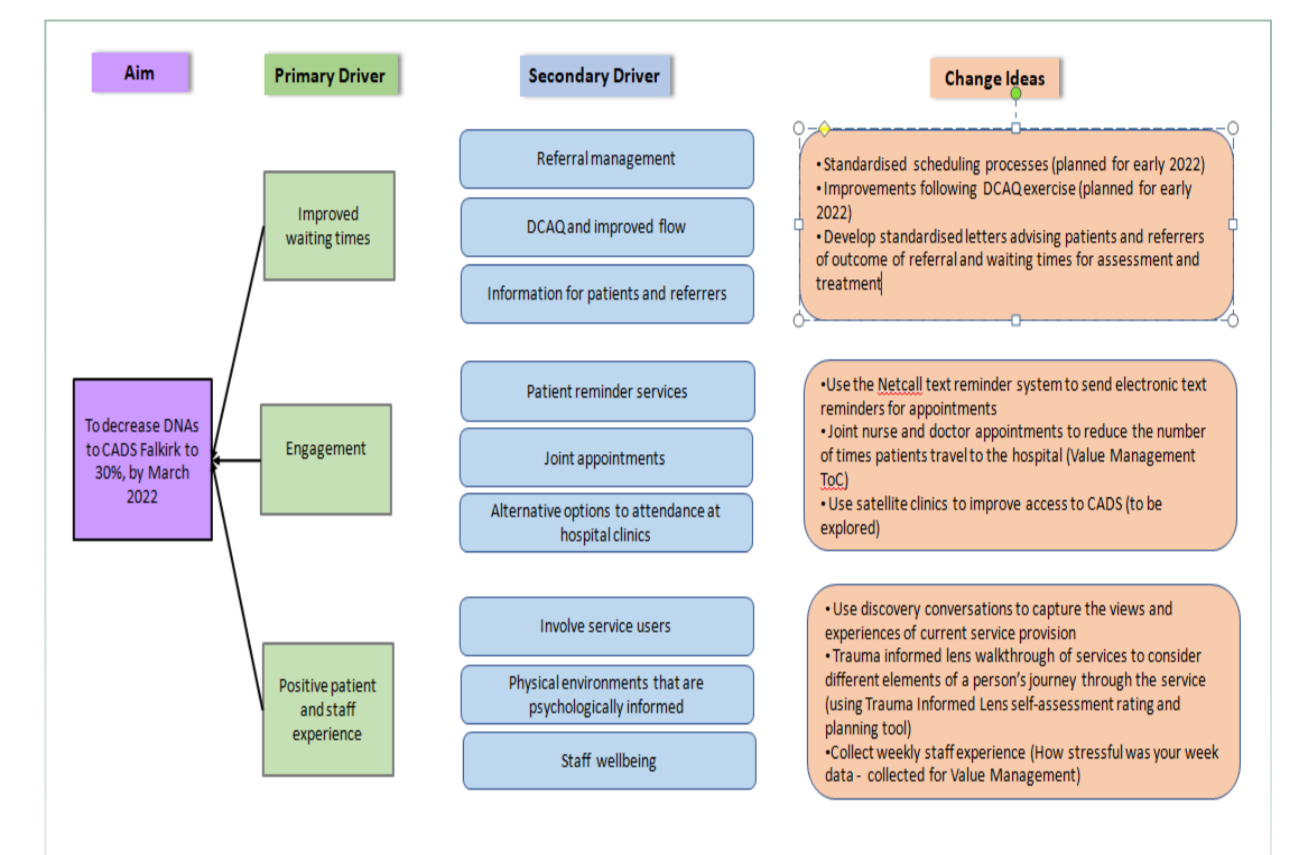
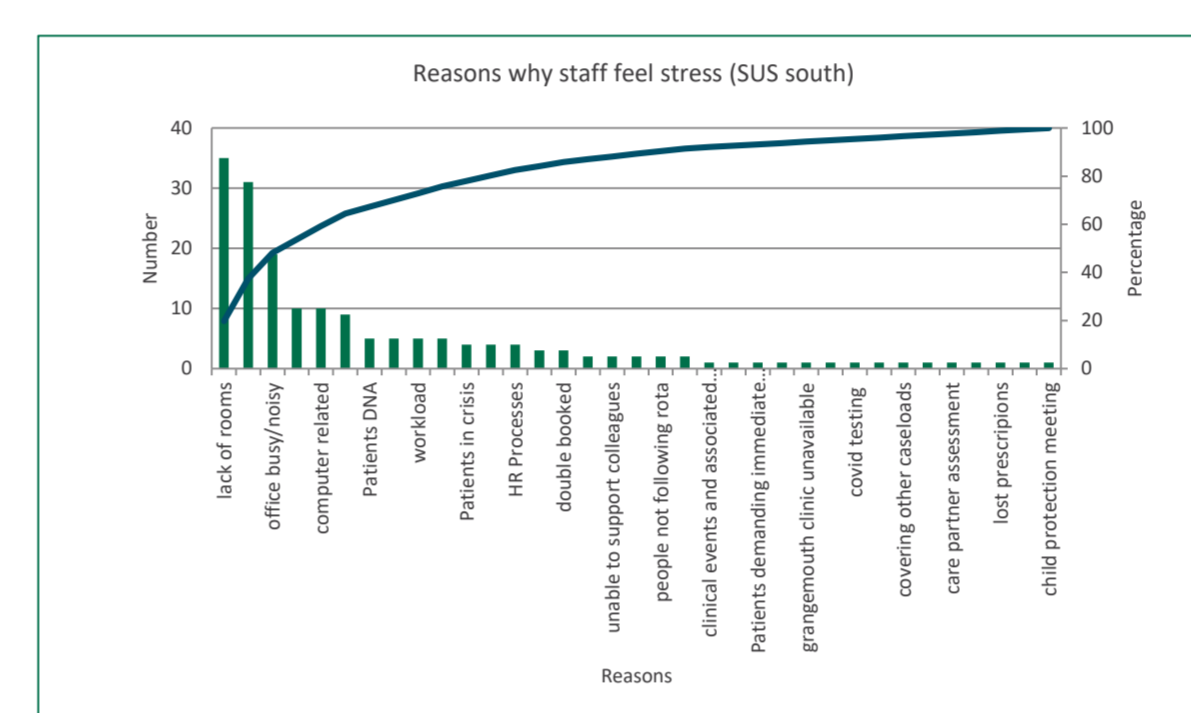
## Introduction

The Substance Use Service has embarked on a programme of work to improve pathways for drug and alcohol treatment. A key objective is to improve waiting times for drug and alcohol treatment the current standard is that 90% of patients are seen within 3 weeks of referral. Improving access to the service through reducing 'did not attend' (DNAs) was one of the interventions identified by the team to improve capacity within the service.

**Aim statement: To decrease DNAs to the Community Alcohol and Drug Service (CADS) in Falkirk to 30%, by spring 2022**

## Methods

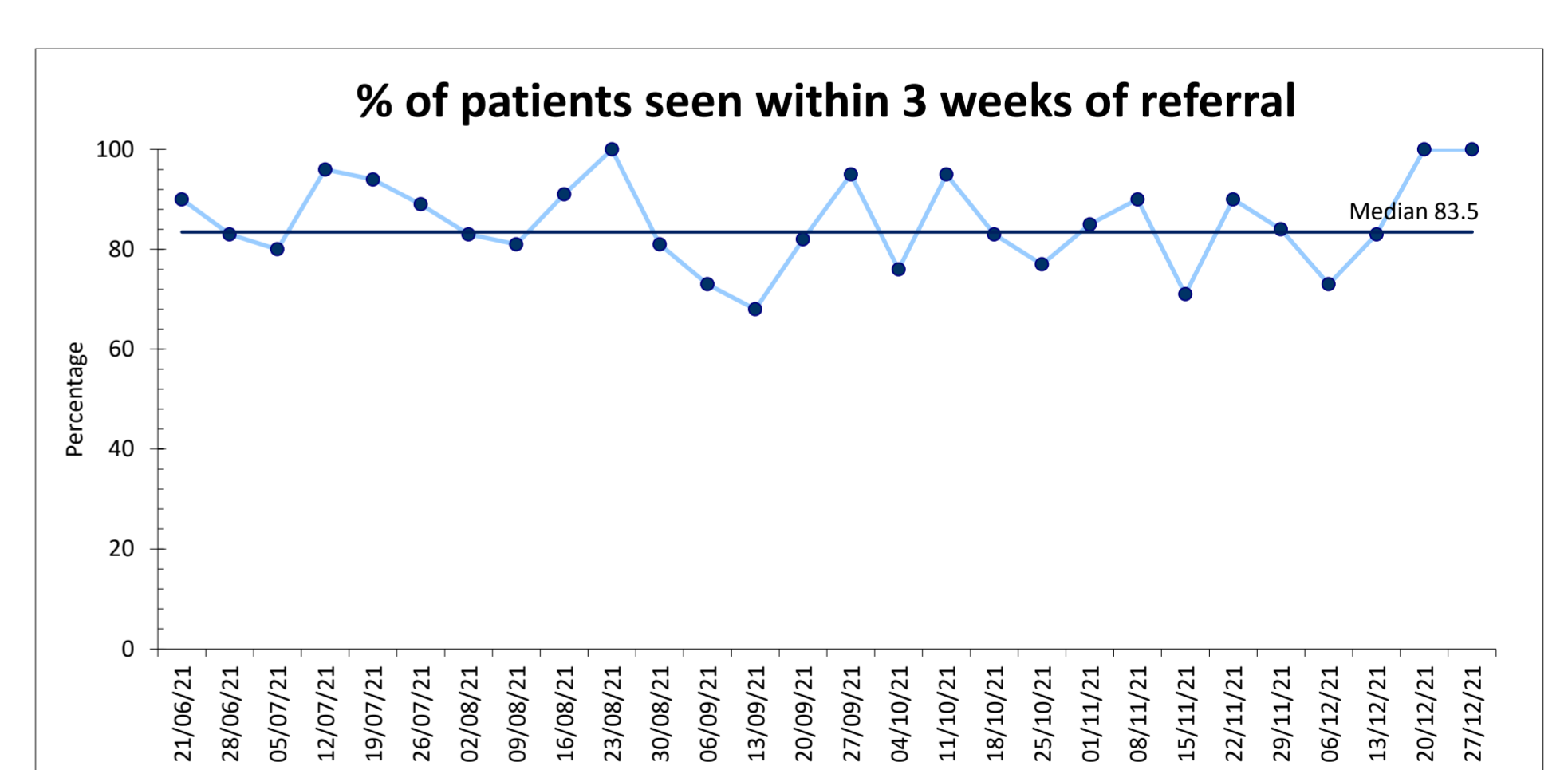
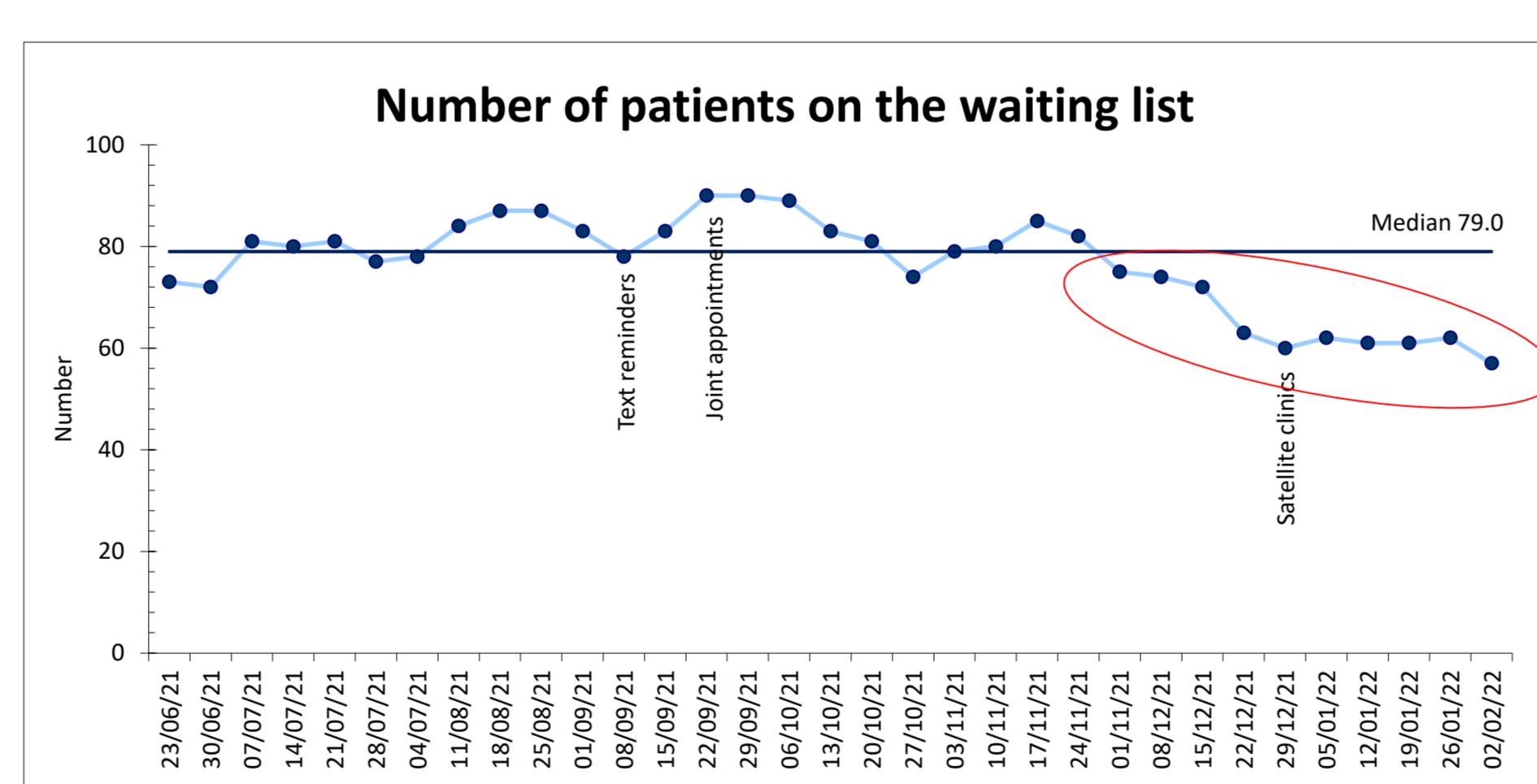
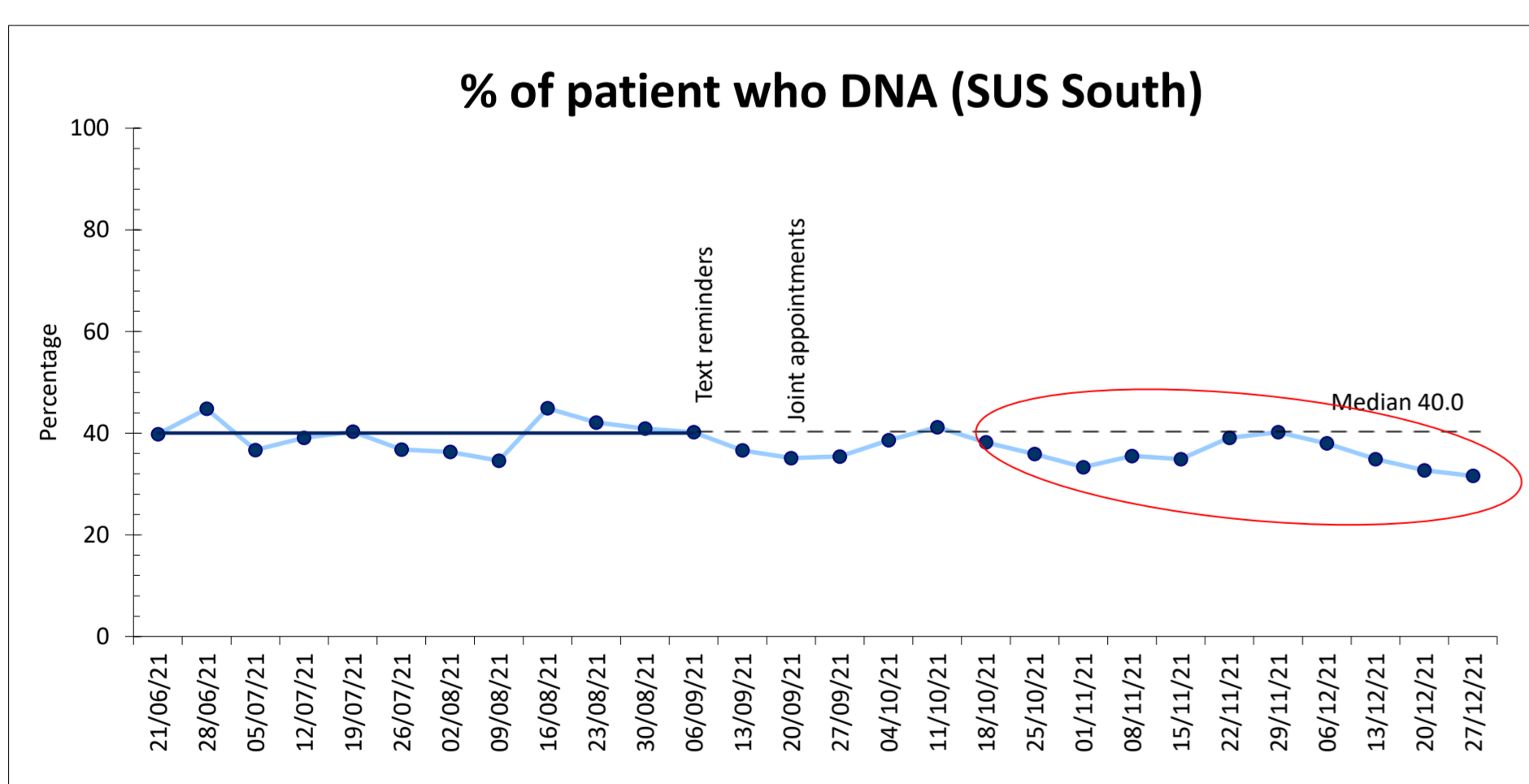
The project team is multi-disciplinary and has representation from hospital services, voluntary sector (Change, Grow, Live) and service user representation. The team meet every two weeks using quality improvement methods to look at the



current pathway and help identify specific challenges and opportunities for improvement. The team identified an issue with DNAs and data showed an above average DNA rate of 40%, and staff experience identified non-attendance at appointments as a reason for stress at work. Change ideas identified by the team to see if they make a difference to DNAs were, using a text reminder system to send electronic text reminders for appointments, joint nurse and doctor appointments to reduce the number of times patients travel to the hospital and using satellite clinics to improve engagement with the service.

## Results

The results show an improvement in the percentage of patients who did not attend their appointment to CADS Falkirk since the work began. The last data point in December the percentage of DNAs decreased to 31.6%. There has also been a sustained improvement in the number of patients on the waiting list to the service reducing the waiting list backlog. The median percentage of patients seen within 3 weeks of referral is 83.5%. Feedback from patients following the introduction of the text reminder system was that it was a useful reminder of their appointment as they had forgotten. Testing joint nurse and doctor appointments was paused temporarily due to staffing changes but has recently restarted in one consultant clinic with the focus being the process for booking and recording joint appointments. Satellite clinics in five local areas started during December 2021 and January 2022.



## Learning and reflections

- What worked well were links the planned care team had with the value management approach being used in CADS at a team level. The weekly huddles and visual management system to present and analyse data engaged the entire team to test the changes identified by the team and support continuous quality improvement
- The importance of the role of the data analyst to undertake demand and capacity modelling to identify variation in the system to enable planned care teams to focus on problem areas

## Conclusions and next steps

Next steps will be to stretch our aim to decrease DNAs a further 10%; activities will include, rolling out joint appointments across the service, looking at what impact satellite clinics are having on DNAs, revisiting staff experience, and collecting the views of patients on service changes to identify further areas for improvement.