

Health Psychology Liaison Service for Health and Social Care

North Lanarkshire Health and Social Care Partnership

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Background

Across health and social care, we need to work in ways that build on natural supports, coping and resilience, helping people to find their own solutions to managing their health. Whilst this is often recognised, effecting the change needed to embed it can be challenging¹. Addressing organisational barriers, staff beliefs, and promoting behaviour change on a system-wide scale are elusive goals, but can be achieved^{2,3}. A Local Authority and NHS partnership in North Lanarkshire developed a Health Psychology Liaison Service (HPLS) to address these issues and facilitate a shift in the balance of care from acute institutional to primary and community settings.

Aim

To develop and evaluate a Health Psychology Liaison Service to improve health and wellbeing of older adults across North Lanarkshire.

What we did

- Following extensive needs assessment, engagement and feasibility work, a broad service delivery model was developed. The initial needs assessment revealed a gap in psychological knowledge and skills of staff supporting older adults in the community, specifically relating to understanding patterns of engagement and factors that motivate health related behaviour change.
- Training was delivered to the workforce to enhance their knowledge and skills in various psychological and behavioural approaches (e.g., motivational interviewing skills). Staff were supported to apply this learning within their roles to facilitate Service User behaviour change and enhance self management of health and wellbeing.

- The Understanding Me tool, was developed to promote person- centred conversations during initial and follow up review discussions with Service Users. This aimed to explore, capture and formulate key information about the person and guide staff to develop highly tailored outcome focused support plans.
- To facilitate the implementation of training in practice and the use of the UM during reviews, guided observation and supervision was provided.
- A consultancy service also supported change on the ground by enabling health psychologists to contribute to biopsychosocial assessment within multidisciplinary teams, develop formulation led intervention plans and help coordinate intervention implementation with staff.

Impact

- Since 2012, 1300 health and social care staff have accessed training focusing on Quality of Life outcomes. Post training evaluations highlighted the impact it had on home support workers' practice, in terms of understanding psychological issues and self efficacy in communicating with service users.
- Psychologists have had consultative input to over 450 cases, working directly with service users, and indirectly with Home Support, Community and Rehabilitation services, Occupational Therapists, CMHTs and service user's families.
- Cost effectiveness has been demonstrated in terms of reduced or delayed care home admission, timely discharge from hospital and prevention of unnecessary hospital admission, reduced use of community alarms, out of hours and emergency services.

- Analysis of the 147 referrals to the consultancy service from April 2016 to March 2017 revealed that 52 support at home packages were deemed unsustainable due to psychological or engagement factors, and 26 at risk of imminent break down. Through detailed cost analysis of the care trajectory prior to intervention, and comparison with the cost of the package sustained post intervention, it is estimated that £1,013,121 of care costs were avoided.

Conclusions and recommendations

The HPLS successfully developed, implemented and embedded a theoretically based model of self management of health and psychological wellbeing across health and social care in North Lanarkshire. The service model has been demonstrated to be an effective and efficient means of supporting health behaviour change, upskilling non psychologist staff, and providing accessible psychological consultation.

References

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