

Introduction

Navigator is an Emergency Department (ED) based support service that aims to support people to move away from violent or chaotic lifestyles providing support with some of the social issues that make many frequent attenders in the ED.

Navigators, who have lived experience of some of the issues the patients face, work alongside medical and nursing staff in the ED at weekends and connect patients to community-based organisations and statutory services on their discharge from hospital. Navigator has been operational in Glasgow Royal Infirmary (GRI) ED since late 2015 and is now active in four Scottish Hospitals¹. Navigators have offered support to 904 patients in GRI and 1560 patients overall. Alcohol and substance misuse and violence are among the most common presenting issues.

This service evaluation aims to determine whether the programme has an impact on ED attendance among patients who engage with the service.



1. Violence Reduction Unit, Police Scotland. <http://www.actiononviolence.org>
 2. Recorded crime in Scotland 2017-2018, Scottish Government, September 2018. gov.scot.uk

Methods

The study was classed as a service evaluation and Caldicott Guardian approval to allow access to NHS data was granted. Patients referred to Navigator programme at GRI from September 2016-July 2017 were identified. Three patients were excluded from analysis as they were deemed unsuitable for Navigator involvement, NHS records of 100 patients were examined via Trakcare and Clinical Portal.

Patients were split into 2 groups, those who engaged with the Navigators (Group 1) or those who declined support (Group 2). ED attendances in the 12 months preceding Navigator intervention and the 12 months post-Navigator intervention were compared. Attendances for unrelated issues, such as sports injuries, were omitted from the analysis.

Results

63 patients engaged with the programme, while 37 patients declined involvement. The represent 11% of patients offered Navigator support at GRI. Presenting social issues for all 100 patients are shown in Fig 1. 72% of patients had more than one issue.

- Alcohol
- Drug abuse
- Violence
- Mental Health
- Homeless
- Domestic Abuse
- Sexual Violence

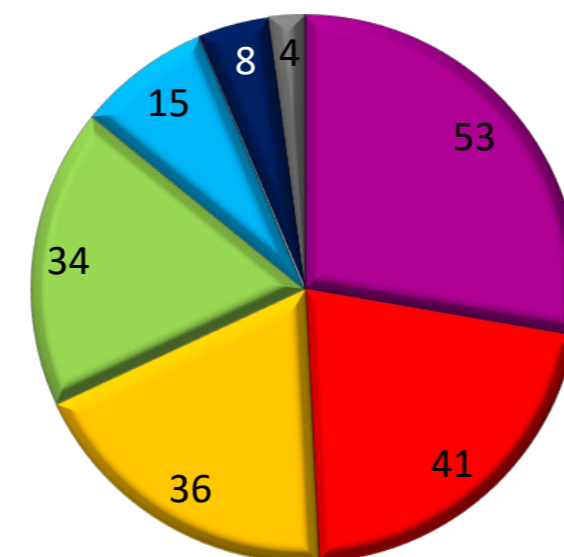


Figure 1. Social issues contributing to ED attendance and Navigator referral (n=191)

ED attendance rates for Group 1 fell by 23.7% at 12 months (187 vs 245 visits) post Navigator intervention while attendance rates for Group 2 rose by 15.3% in the same time period (98-vs 113 visits) (Fig 2). There was a significant difference in rates of attendance between the two groups at 12 months post intervention ($p < 0.05$, Chi square test).

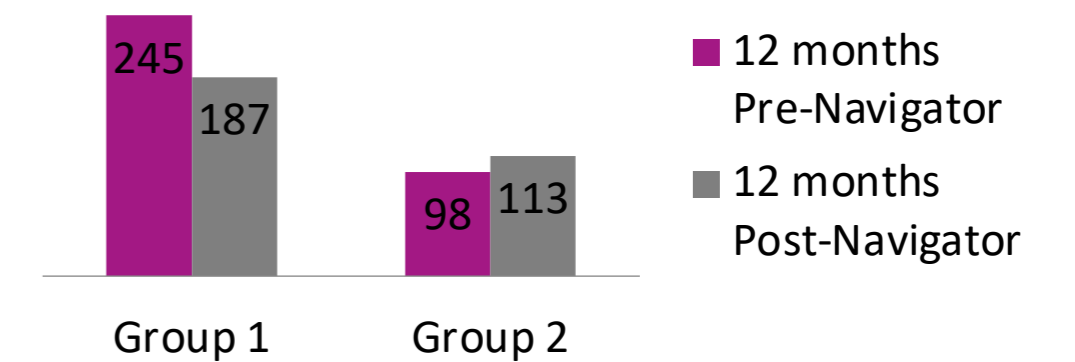


Figure 2: Number of ED visits for those who engaged with Navigator (Group 1 n=63) and those who declined support (Group 2 n=37) in the 12 months before and after referral to the Navigator Programme

Although numbers were small there was also a significant difference in ED attendance for the subset who presented with issues related to alcohol misuse (n=53) whose ED attendance fell by 23.5% in Group 1 at 12 months post Navigator intervention and rose by 1% in Group 2 at the same time period ($p < 0.05$).

Discussion

Scotland has shown a significant reduction in violent crime through a multi-agency approach using a public health model over the last 12-15 years².

The high rate of engagement with the Navigator programme and the significant reduction in attendance among those who engaged with the programme demonstrates the potential of the Navigator programme to help our stretched emergency services and to contribute to the ongoing programme of violence reduction in Scotland.