NEDAC

Complex and Multiple Needs Team

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BIG LOTTERY FUND

NATIONAL LOTTERY FUNDED

Referral Criteria and Form

NEDAC **Complex and Multiple Needs Service**

0131 629 4581 **E-Mail: Lothian.nedac@nhs.net**

With clients, we will provide:

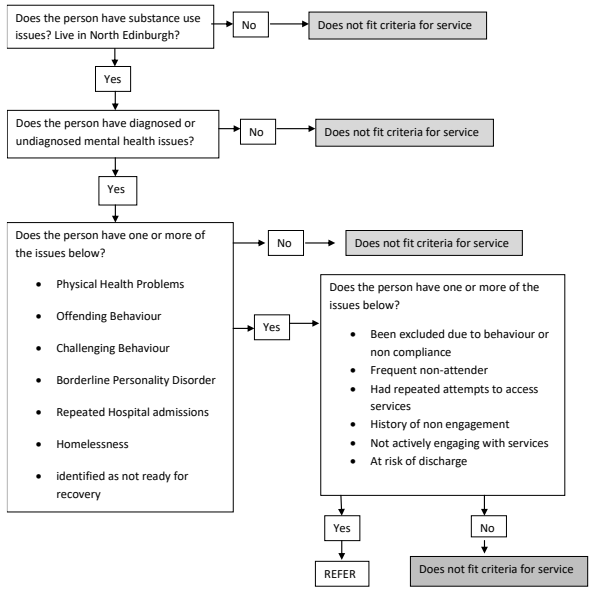
an holistic, client-led intervention;

a psycho-social rehabilitation approach to encourage a shift to re-integration and independence;

liaison, advocacy and enablement in relation to treatment services, primary-care appointments, welfare rights and the like;

practical support and tenancy sustainment.

Referral Criteria



NEDAC Complex and Multiple needs Referral Form

Date **Name**

Address

DOB **Contact Number**

Referrer/Agency Contact Details **GP**

Please refer if meets all 4 criteria to Lothian.nedac@nhs.net

Does the person have substance use issues? ☐ Yes ☐ No

Details...

Does the person have diagnosed/undiagnosed mental health issues? ☐ Yes ☐ No

Details...

Does the person have one or more issues below? ☐ Yes ☐ No
(Physical Health Problems, Offending Behaviour, Challenging Behaviour, Borderline Personality Disorder, Repeated Hospital Admissions, History of Homelessness, Identified as not ready for recovery)

Details, if yes...

Does the person have one or more issues below? ☐ Yes ☐ No
(Excluded due to behaviour or non compliance, Frequent non-attender, Repeated attempts to access services, History of non-engagement, Not actively engaging with services, At risk of discharge)

Details...

Risk Assessment
(Are there any known risks for lone working, home visiting, violence, criminal history etc)

Details...

Examples of Referral form

Substance Use **CPN**
PWID, difficulty in engaging with services, Commenced on OST whilst inpatient due to complications of injecting heroin

Excluded **Social Work**
Attended all appointments offered but not meaningfully engaging due to low motivation

Mental Health **CPN**
PTSD and anxiety disorder, finds it difficult to leave flat, night terrors

Mental Health Issues **HUB**
A number of diagnosis on top of amphetamine use, Emotionally unstable personality disorder, anxiety, agoraphobia, PTSD and gender reassignment

Physical Health **Drug Liaison Nurse**
HCV +, willing to engage with SMD on discharge, feels they will still use illicitly as mental health coping strategy . Has presented at A&E in distress 'drug seeking behaviour??'

Excluded **Drug Liaison Nurse**
Non Attender, will disengage if needs not met

Excluded **CPN**
Put off GP list due to not attending appointments

Substance Use **GP**
I would be grateful if you could see this man who is an apparent alcohol enthusiast.

Substance use **GP**
Foetal Valporate syndrome, illicitly using Heroin, amphetamine, cocaine. He continues to seek additional drug solutions to his problems

Excluded due to behaviours, non compliance **HUB**
Would like to make changes to substance use however has not been able to attend appointments at the HUB **due to agoraphobia** therefore is not engaging with HUB services

Discussion - Referral

- Significant history of amphetamine use £160 per week, uses to relieve depression
- Number of mental health diagnosis on top of amphetamine use, Emotionally Unstable Personality Disorder, Autism, Anxiety, Agoraphobia, PTSD, Gender Reassignment
- Difficulty getting around due to back problems
- Only service contact is visiting housing support providing emotional support and GP home visits
- Would like to make changes in substance misuse but unable to attend appointments due to Agoraphobia, therefore not engaging with services
- Accommodated in Sheltered Housing

Our Approach

- Client Profile
- Assertive Outreach / Case Management
  - Key Worker
  - Non office based
  - Non Punitive
  - Persistent approach
- Benefits of this approach
  - Therapeutic relationship
  - Consistent worker
  - Whole person approach
  - Co-ordination of services

What's Different Now?

- Reduction in chaos in her daily living
  - Full social needs assessment
  - Debt resolution
  - More structured care package
  - Professionals meetings
  - No missed appointments
- Reduction in illicit substance use
  - Periods of abstinence / reduction in level of use
- Improvement in mental health
  - Stabilised symptoms
  - Fewer episodes of depression
  - Ability to engage with other services
  - Willing to look at her past trauma
  - Referral to Psychology
- Improvement in physical health
  - Better engagement with GP
  - Attending necessary health appointments
  - Improved diet

What needs to change?

Some things to consider

- Who is best placed to lead this?
- Ways of working
- Contracts / Commissioning
- Outcomes
- Staff experience / skills / Training
- Policy / procedures

Thank You

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- Stuart Anderson – stuartanderson@nedac.co.uk
- www.nedac.co.uk