

Evaluation of the Enhance Programme: Summary Report



The Enhance programme links Leeds Community Healthcare Neighbourhood Teams (NTs) with third sector delivery partners (DPs) to enhance capacity in both sectors and delay discharge and avoid readmission to hospital. It is managed by Leeds Older People's Forum on behalf of Forum Central, in partnership with Leeds Community Healthcare.

The evaluation covers the period June 2022 to March 2023 and is based on: quarterly monitoring returns, a two phase questionnaire and discussions with: 15 clients, 22 DPs, 15 NTs, 6 LOPF and 3 LCH staff.



Overview

Background and the Enhance model

- 14 DPs worked across 10 NTs, reaching 404 people
- 64% of referrals came through NT, others from social prescribers, GPs, Adult Social Care, third sector organisations and self-referral
- Enhance reached a vulnerable cohort: 78% described their health as either fair or poor, 67% were only able to carry out every day physical activities either a little or not at all and 71% reported that their quality of life was either poor or fair
- The patients referred by NTs were twice as likely to reside in the most deprived areas of Leeds (50% compared to 24% in the total NT caseload).

The Enhance model

- Enhance was described as holistic, person-centred and flexible to the client's needs
- NT staff valued being able to refer to a dedicated worker with knowledge of the local community, who offered relational and complementary non-clinical support
- Relationship building was assessed as key. This worked well where DPs successfully established a regular and visible presence and identified joint working opportunities, though is taking longer to embed for some areas.

How Enhance is achieving positive client outcomes

- Participants returned an increased average score across physical, mental, and social health, as well as improvement to overall quality of life and reduced fatigue
- Just over a quarter of participants have started to attend additional groups or activities offered by the third sector.
- Without the Enhance offer, clients would have fallen through gaps and not received the help they needed (e.g., repairs would remain outstanding, income remain unclaimed, prescribed exercise would not be maintained). This was particularly so for isolated clients with limited family support
- Though feedback overall suggests Enhance has some way to go to ensure a presence at NT level, NT staff who regularly referred in reported that the practical and emotional service offered had contributed to reducing workload pressures
- As Enhance moves into the second phase NT staff want to see: a more consistent, clearer offer across DPs; more 'light touch' tasks which directly complement clinical elements of the role (e.g., medication tracking, supporting prescribed exercises), increased transport options.



Workers support clients to maintain a safe home environment: sorting out alarms, telecare, aids and adaptations; replacing furniture and appliances; liaising with housing teams to get essential repairs done; sorting out food shopping; arranging delivery of hot meals; empowering clients to tackle a cluttered environment so they can move around more safely.

“The worker looked at my home and asked me what could help me feel safer, he looked at my appliances and helped me get a handrail for the bathroom...my old Zimmer frame kept dragging and ripping up the carpet so they helped me to get a new one.”

Workers provided non-clinical complementary support, which included: attending cross sector appointments; referrals to Adult Social Care; promoting walking outdoors and exercise; offering ‘light touch’ medical support (such as picking up prescriptions, encouraging to complete prescribed exercises); preparing food; clients access help around personal care.

“I got a broken tooth – the [worker] told me not to worry and took me to the dentist...last week I had forgotten to pick up my prescription, I rang him up and he picked it up and brought it to me...I am on an insulin pump and keep going hypo, the worker helps– he runs to the kitchen and gives me jelly babies and stays with me until I am right. He got me a walking frame...as I am not steady on my feet.”

Advocacy and coordinating care, clients provided a number of examples of workers accompanying them to primary and secondary healthcare appointments and communicating with health, social care and housing services on their behalf. This support helped clients better manage their health:

“I have fallen a few times the past few months – my legs are so weak. [Enhance] is working with social services to organise things to help me. [I have now] got a chair for the kitchen...I can now sit down when washing and shaving and can prepare something to eat.”

Reducing the impact of poverty can help prevent health conditions from developing or worsening through ensuring people can heat their homes and eat well. Enhance workers sort out food parcels; liaised with phone providers, supported people to check their bank statement/credit cards to limit overdrafts/overpayments, and worked with energy providers to set up affordable repayment plans.

“I had been struggling to pay my bills...[the worker] contacted gas and electric...[she] sorted out my discount and has arranged for someone to visit and help me maximise my income. This has really helped and I feel able to turn my gas on now, I need to keep warm.”

Supporting emotional wellbeing. A frequent theme through the fieldwork was the role that Enhance plays in supporting a client’s mental wellbeing, particularly for those with limited family support, which NTs reported as being reassuring to them.

“I look forward to [the worker] coming – we have a laugh, it’s not all about treatment and cancer... this helps with my mental health - which does as much good for me as any of the nurses with treatments and pills – it’s about your morale too.”

Increasing social integration and reducing loneliness. The social aspect of Enhance was valued for clients who had limited family support and were at risk of loneliness and social isolation, and was one of the most frequently cited reason for referral by NTs.

“I lost my partner earlier this year ... I was so lonely and the [worker] has been someone to talk to about it... I am now looking to get out and meet peopleshe referred me to a befriender.”

How Enhance is contributing to wider health outcomes

- Reports of reducing unplanned hospital admission through contributing to limiting falls, support around maintaining health and wellbeing, reducing loneliness
- Enabling timely hospital discharge through ensuring people can return home safely, or offering practical help for those with limited family connections
- Slowing deterioration of health through tailoring support to needs which are not met through other services, reducing likelihood of return to NT services.

Test, learn, improve

Enhance is picking up learning to shape future delivery through:

- Taking steps to ensure all 13 NTs can benefit from Enhance after identifying gaps in need across the areas not covered
- Ongoing actions to clarify area boundaries as lack of geographic alignment between NTs and DPs had caused confusion
- Allowing DPs to widen referral routes due to lower than expected referrals from NTs
- Looking to design a 'core offer' in response to NT feedback that the offer was not clear to some.

Considerations for phase 2

Widen referrals to embrace a more proactive, preventative approach and offer a non-clinical pathway route. Partnership across hospital discharge, wider health and social care pathways are being explored by the programme team. Enhance should also link in with health led initiatives which are modelled around a single point of access (such as health triage hubs).

Encourage co-working models. DPs are looking to build on effective referral routes through developing cross-sector community spaces and colocation approaches.

Link in with specific NT staff teams who build a more consistent overview of the patient and are more likely to link in with community based support (e.g., Self-Management Team, OTs, Matrons). These staff can then promote and cascade the benefits to other NT colleagues.

Ensure buy-in from senior clinicians and the operational management team to ensure Enhance is discussed more widely at NT level. It will take time for this to impact on workloads and for some NT staff to acknowledge that they do not need to do everything themselves, which is again why it may be more beneficial to initially focus on staff who are more inclined to use Enhance.

Develop a peer cascading approach. Identify NT 'ambassadors'. A few NTs interviewed suggested they would be willing to 'sell' Enhance across their teams due to the positive impact it had on their patients and reduced pressure on their workload.

Set up referral pathways with staff working environments in mind. It is important to give regard to NTs who may have limited time during or after appointments and may struggle to access a digital device. Actions should also be taken to improve data sharing access across SystemOne.

Develop a standardised core offer which DPs can provide directly or signpost, some suggestions, based on feedback include: ensuring the home environment is safe, community integration for socially isolated patients, agency advocacy, setting up services to manage health and care and financial support. Ensure materials are 'pithy', where the offer can be gleaned at a glance.

Continue to build meaningful relationships at wider system level to help raise the profile of Enhance. The wider steering group which contains representatives across the local authority, health and third sectors is a key resource to help push this wider agenda and ensure there is ownership of the ambitions of Enhance at wider system level.