Pathways of Care for Healthcare Professionals with Alcohol and Drug Problems

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South London and Maudsley NHS Foundation Trust
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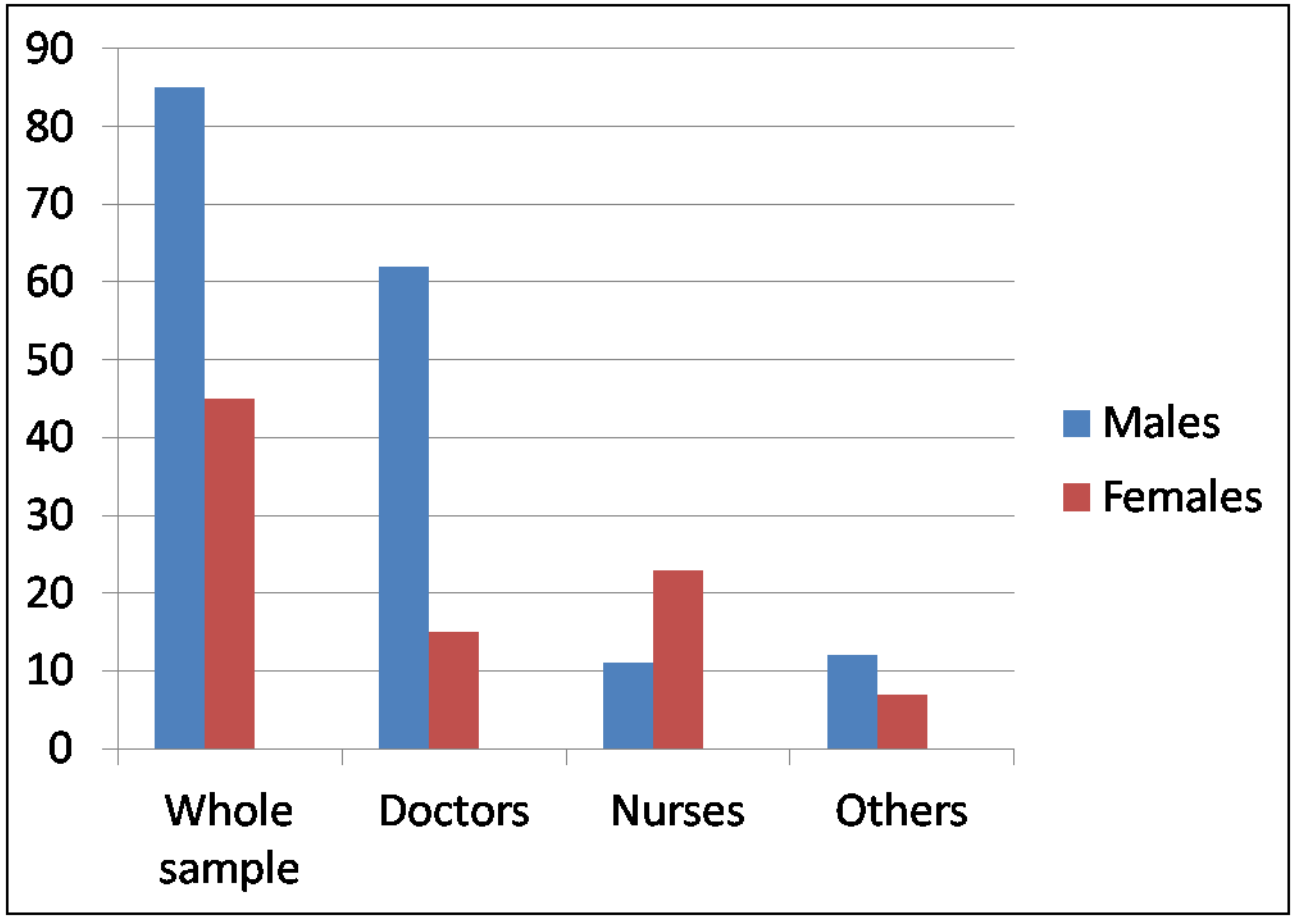
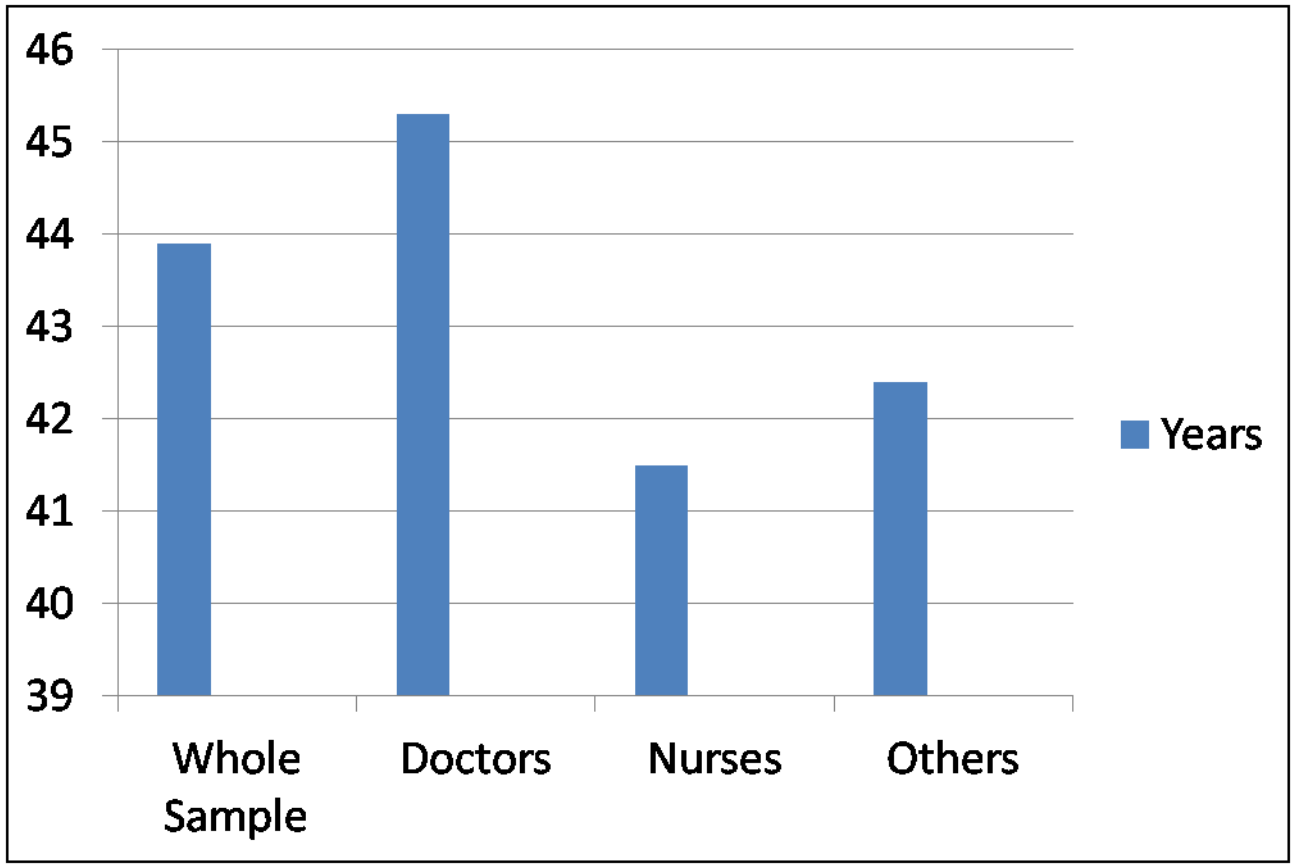
Methods and Sample

- Clinical case note audit
- All healthcare professionals referred to a specialist service at the South London and Maudsley NHS Foundation Trust
- 1 January 1998-1 June 2006
- N= 130:
  - Doctors (n=77); Nurses (n=34); Others (n=19)
  - Two thirds male

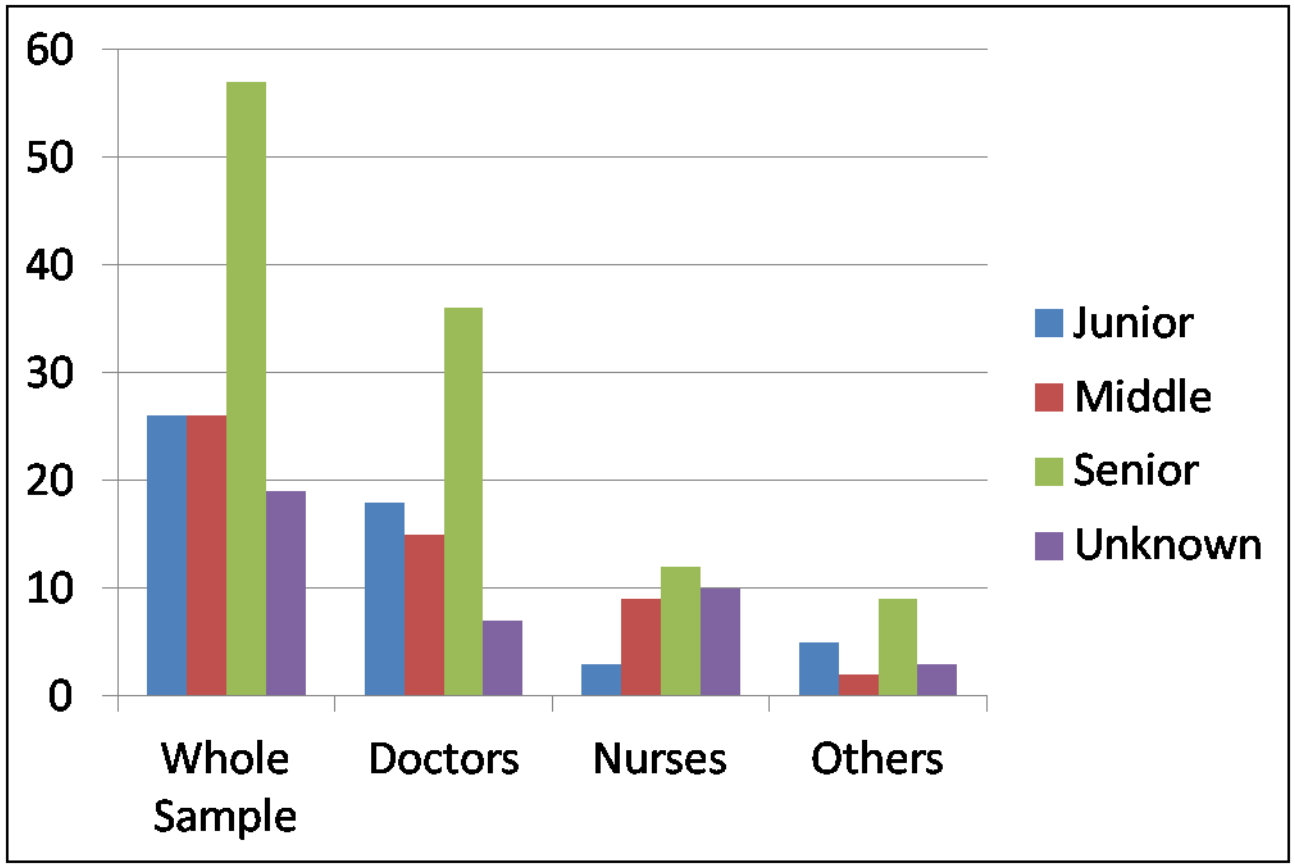
Gender


90
80
70
60
50
40
30
20
10
0
Whole sample
Doctors
Nurses
Others
Males
Females

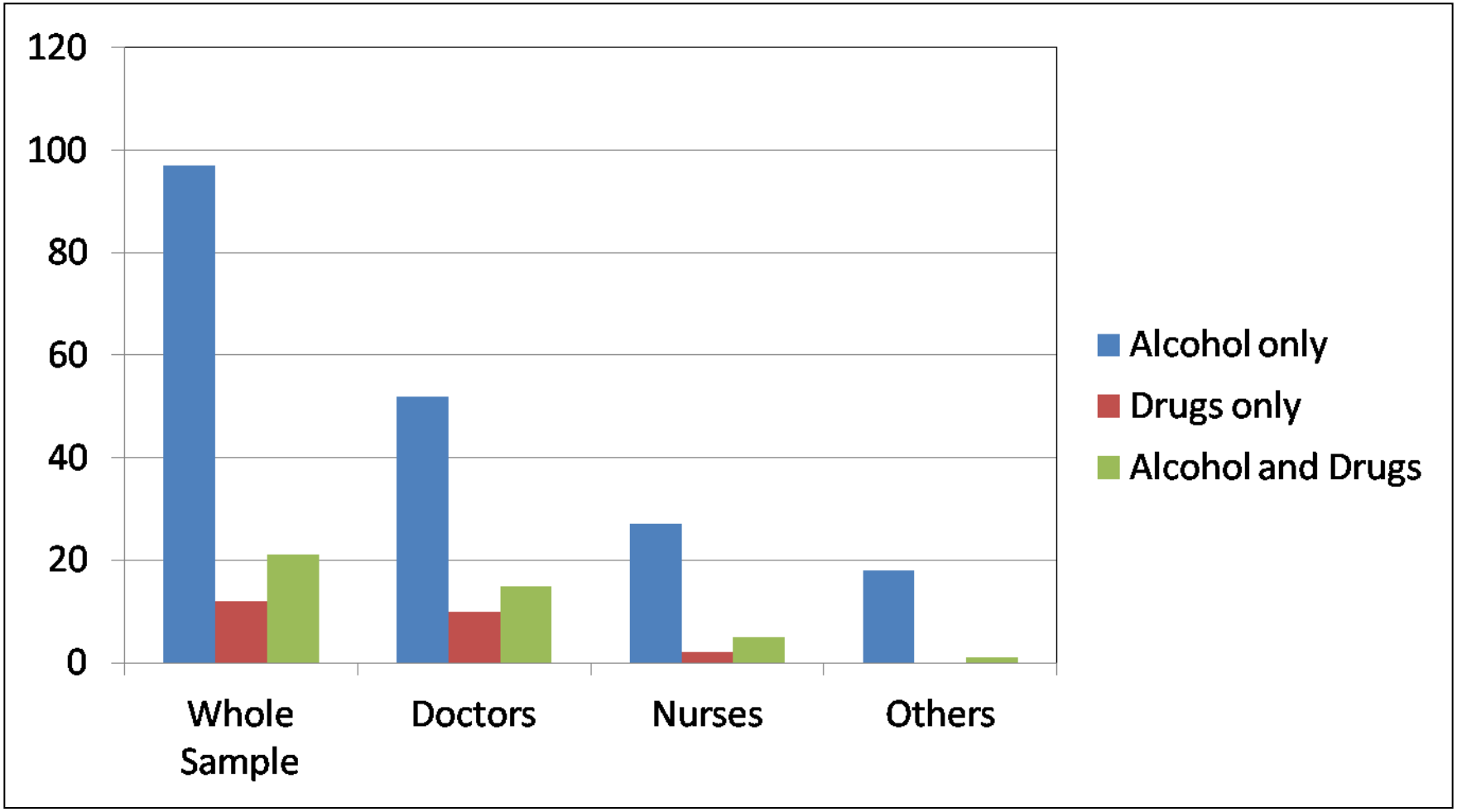
Age


46
45
44
43
42
41
40
39
Whole Sample
Doctors
Nurses
Others
Years

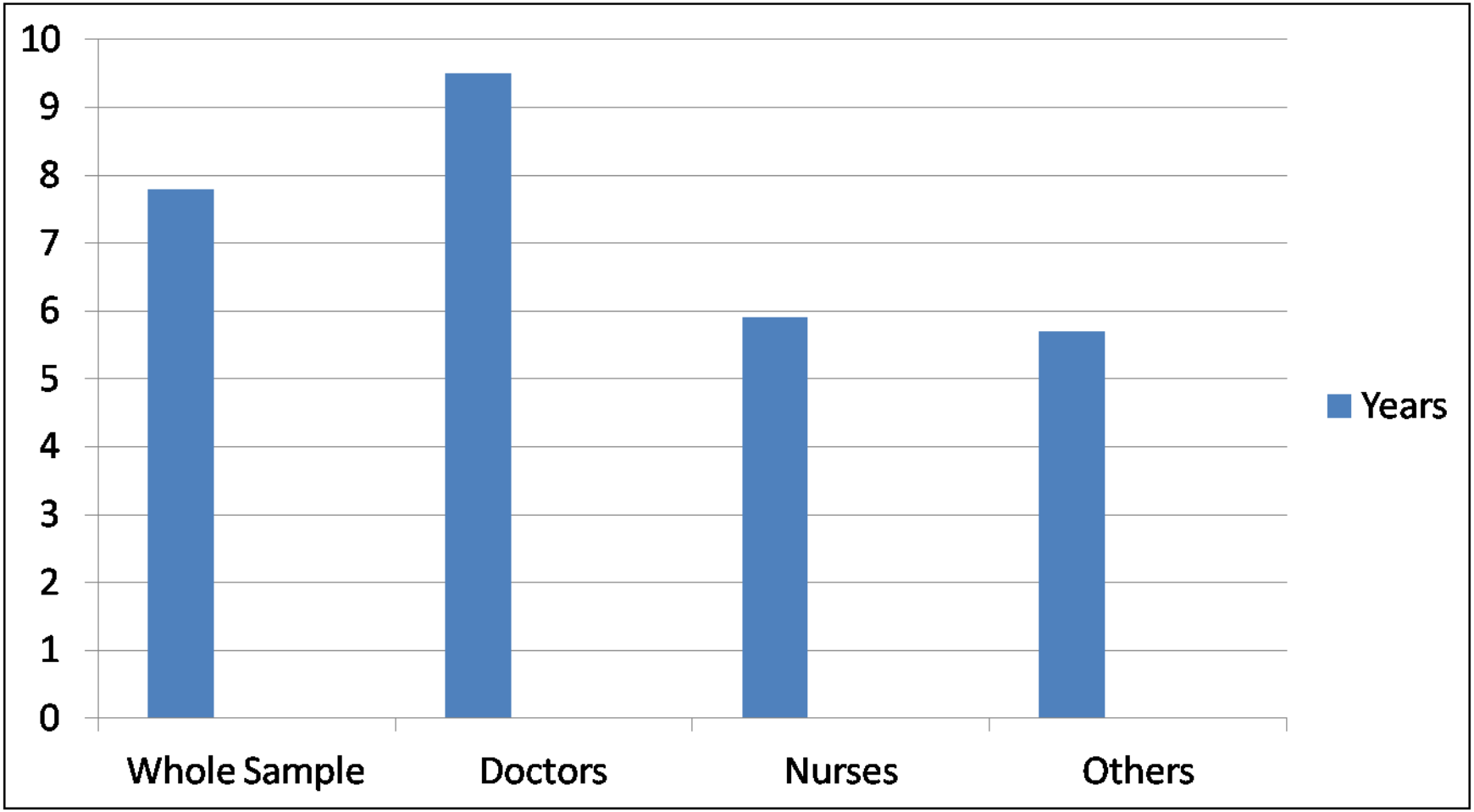
Seniority


60
50
40
30
20
10
0
Whole Sample
Doctors
Nurses
Others
Junior
Middle
Senior
Unknown

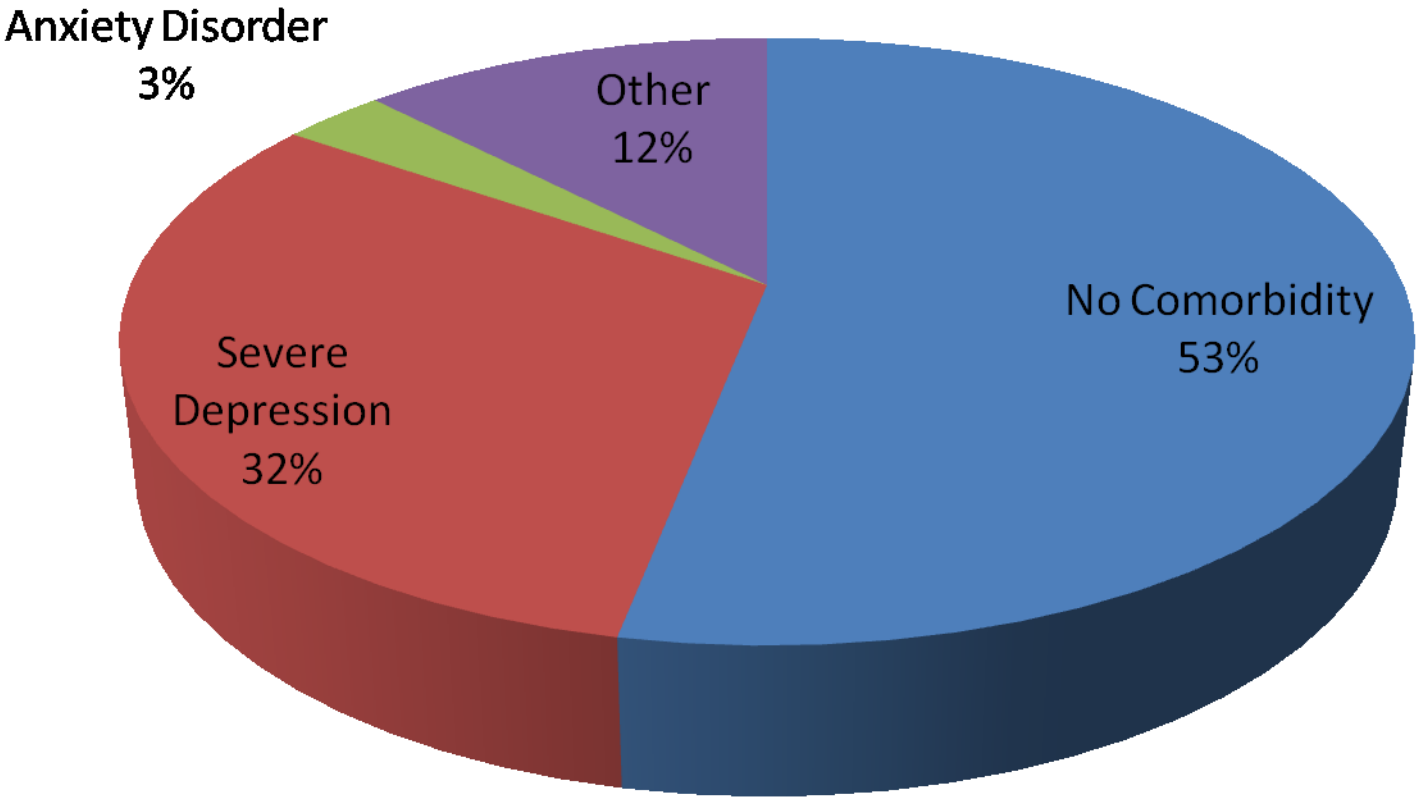
Substance Used



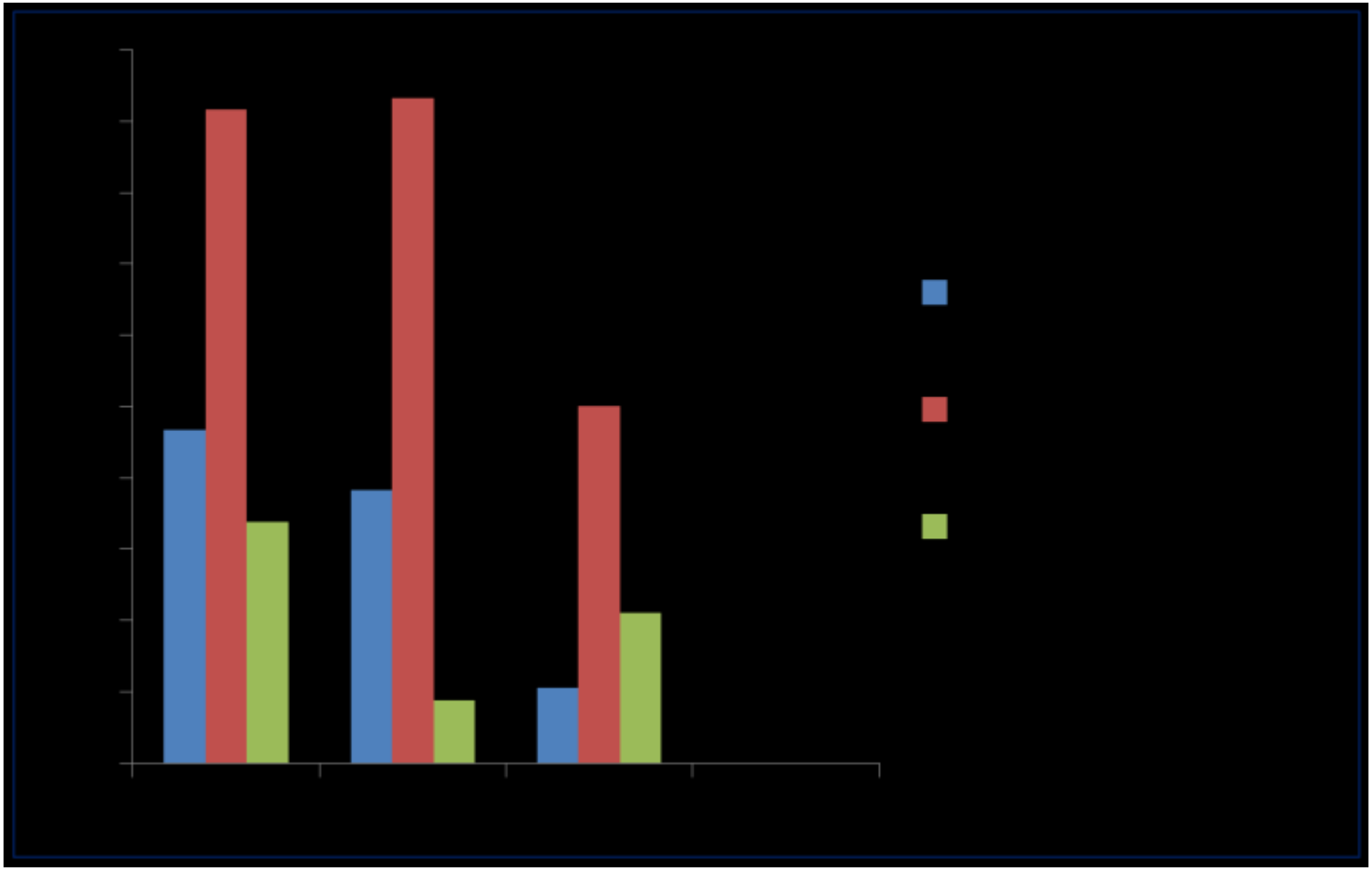
Years of Problematic Substance Use



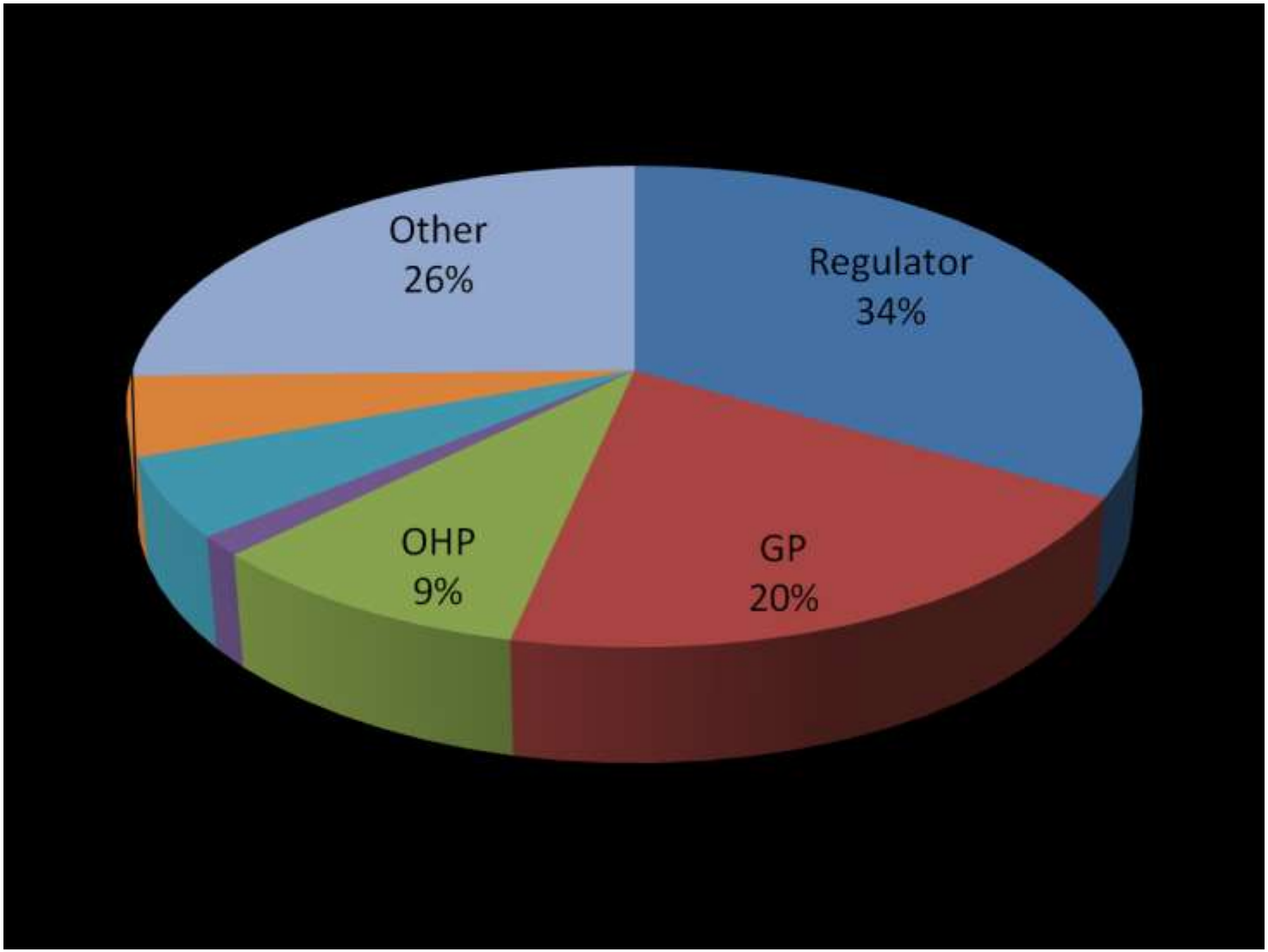
Psychiatric Co-Morbidity



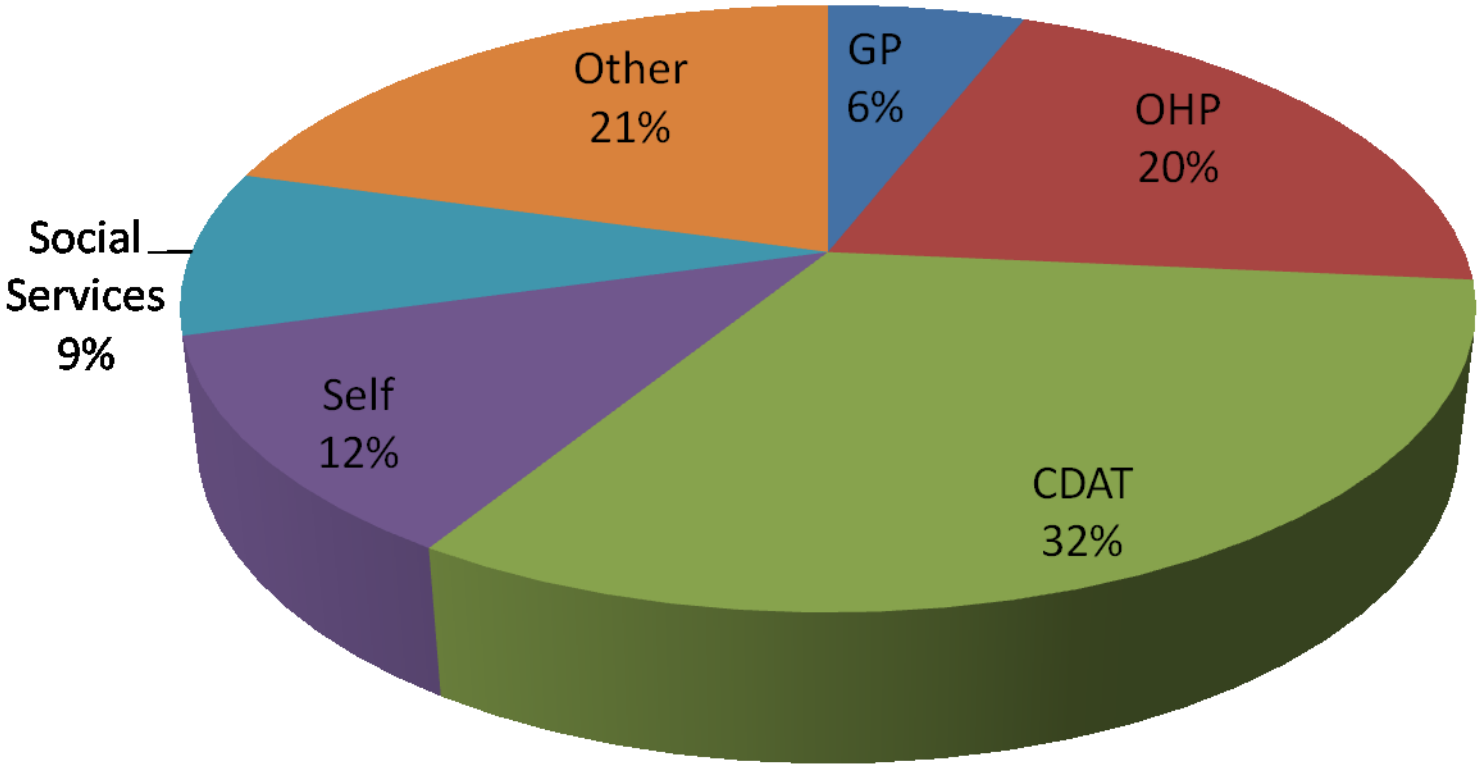
Work Related Incidents (%)

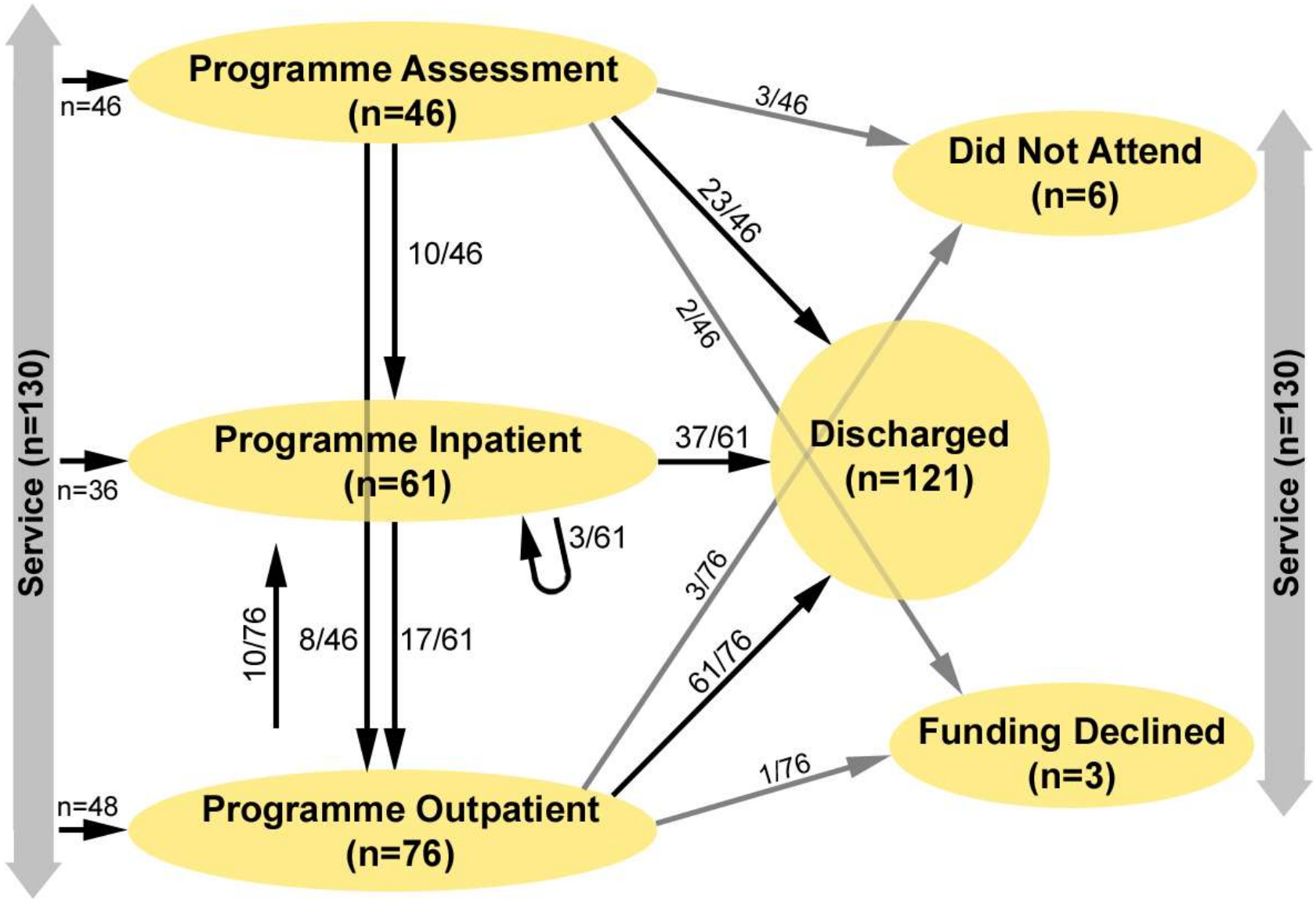


Sources of Referral for Doctors



Sources of Referral for Nurses




Service (n=130)
n=46
Programme Assessment (n=46)
3/46
Did Not Attend (n=6)
23/46
10/46
2/46
n=36
Programme Inpatient (n=61)
37/61
Discharged (n=121)
3/61
3/76
10/76
8/46
17/61
61/76
Funding Declined (n=3)
1/76
n=48
Programme Outpatient (n=76)
Service (n=130)

Analysis of Pathways

- Data entered into bespoke database (Microsoft Access 2003)
- Database allowed for graphical representation of individual pathways to treatment
  - Integrated programming of Graphviz win 2.8
- Data initially explored visually to identify trends, then transformed to fit SPSS 15
- Primary path and primary critical path

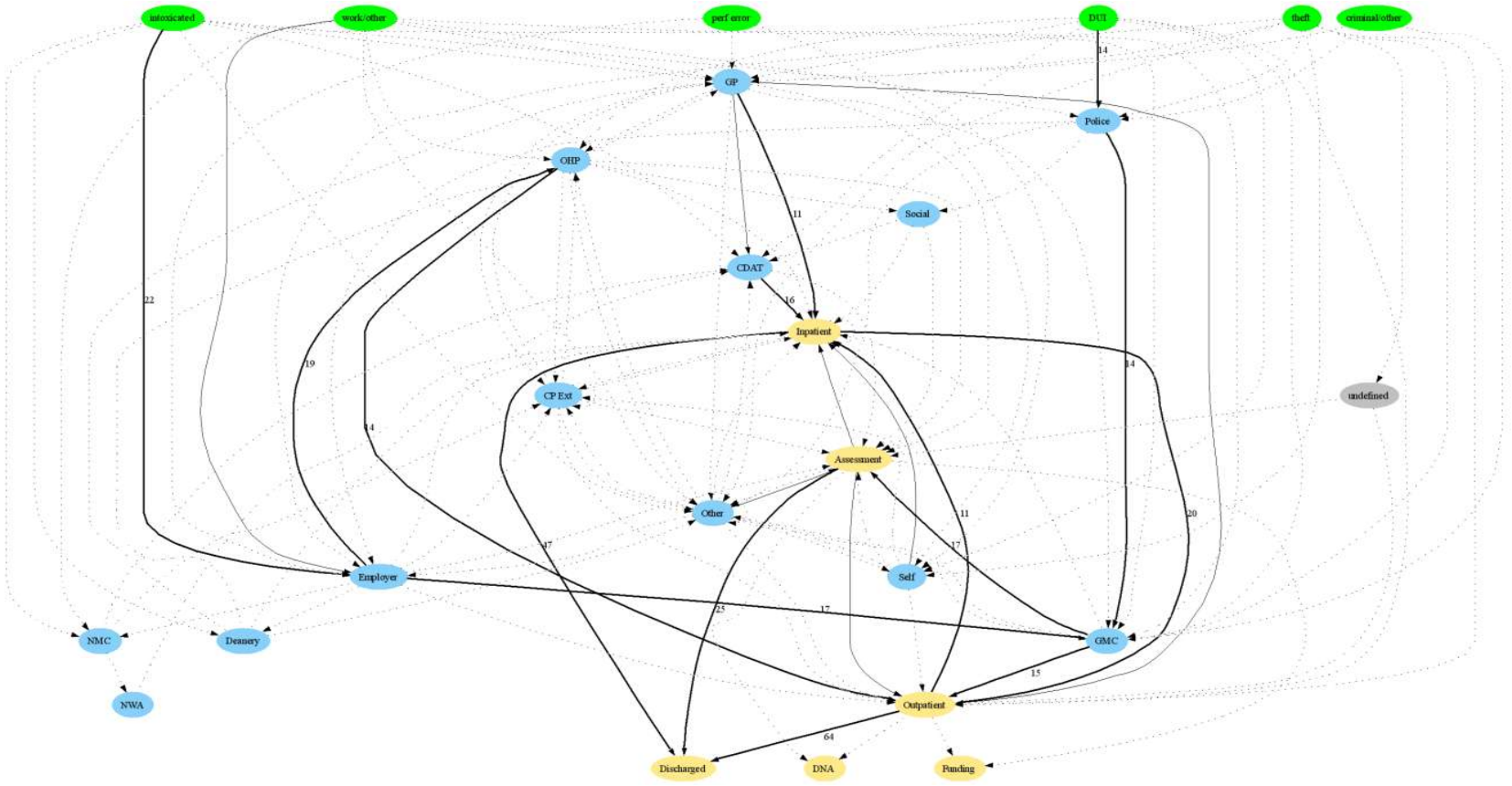
Analysis of Pathways

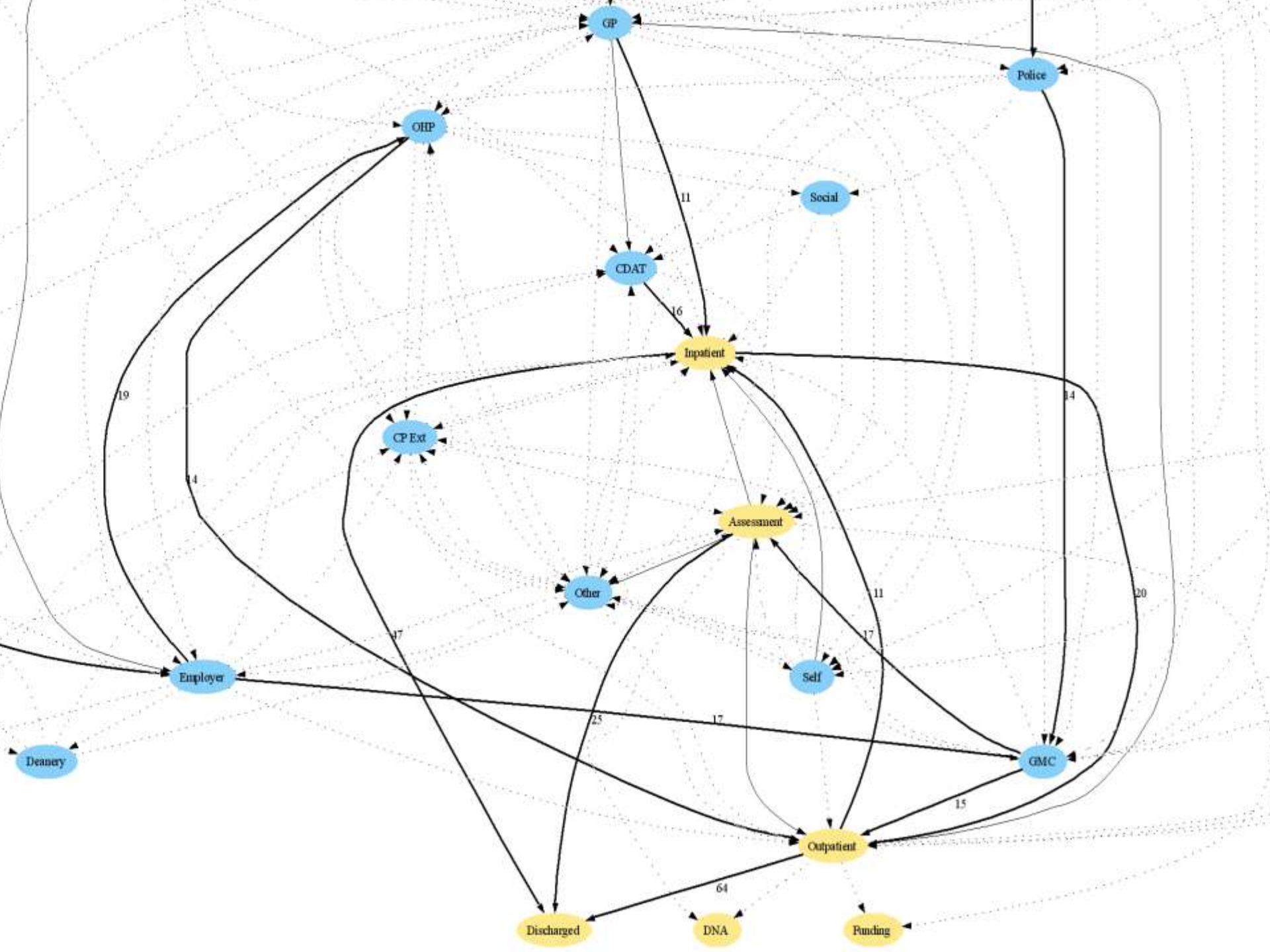
- N=130 healthcare professionals
- No single coherent route of referral observed from visual representation
- Total of 640 referral nodes recorded in the primary referral pathway (specific event at a specific time: e.g. Drink-driving charge)
  - 89% on the critical primary pathway
- GP and GMC nodes arose most frequently in both pathways

Analysis of Pathways

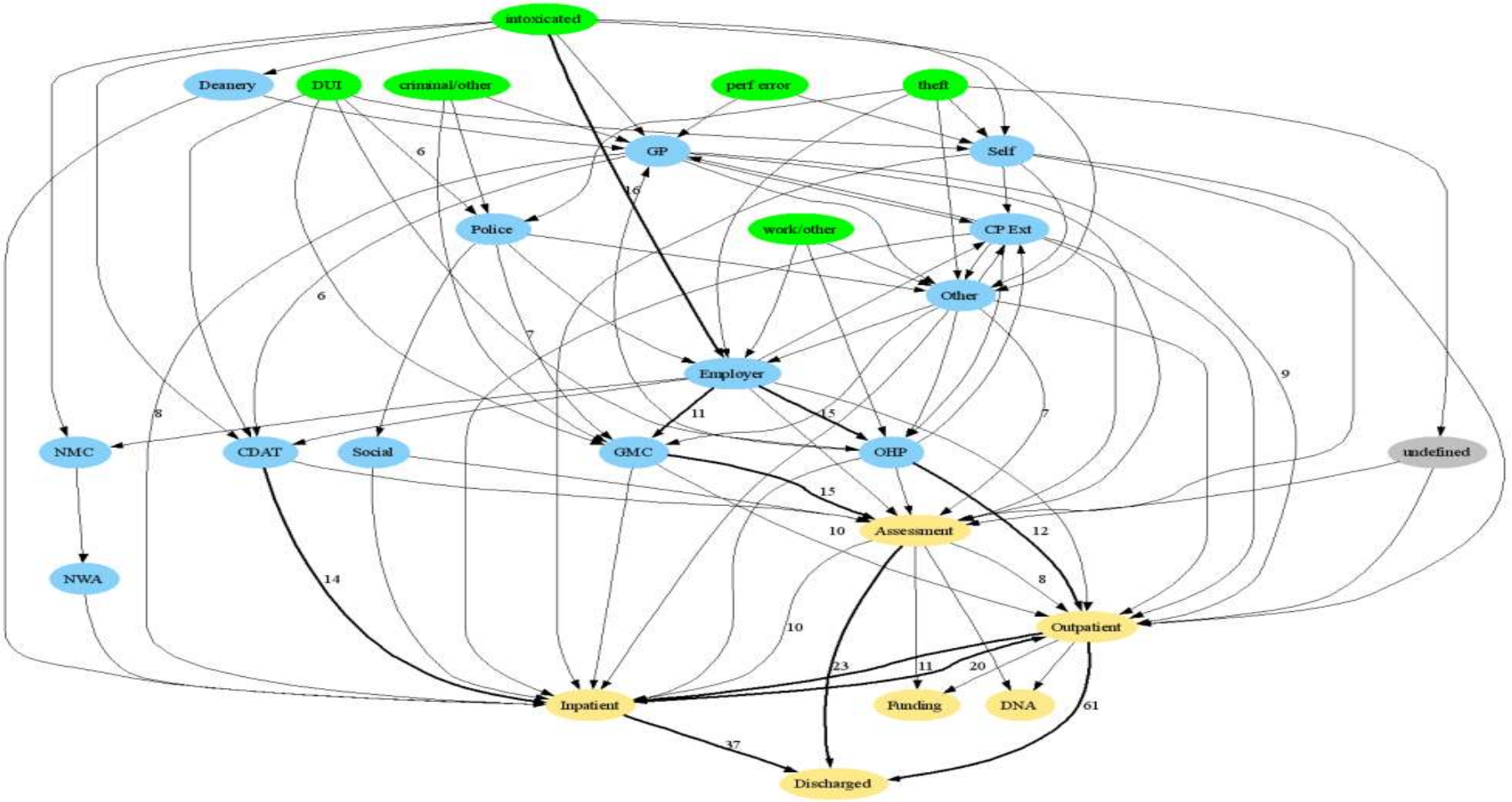
- Primary critical pathway
  - 27% of HCPs had their GP and 27% had their employer involved in their direct path to accessing the service
  - 21.5% had their regulatory body involved
- Women were more likely than men to have the CDAT (24% vs 7%, $p<0.01$) involved
- Men were more likely than women to have the regulator involved (40% vs 20%, $p<0.05$)

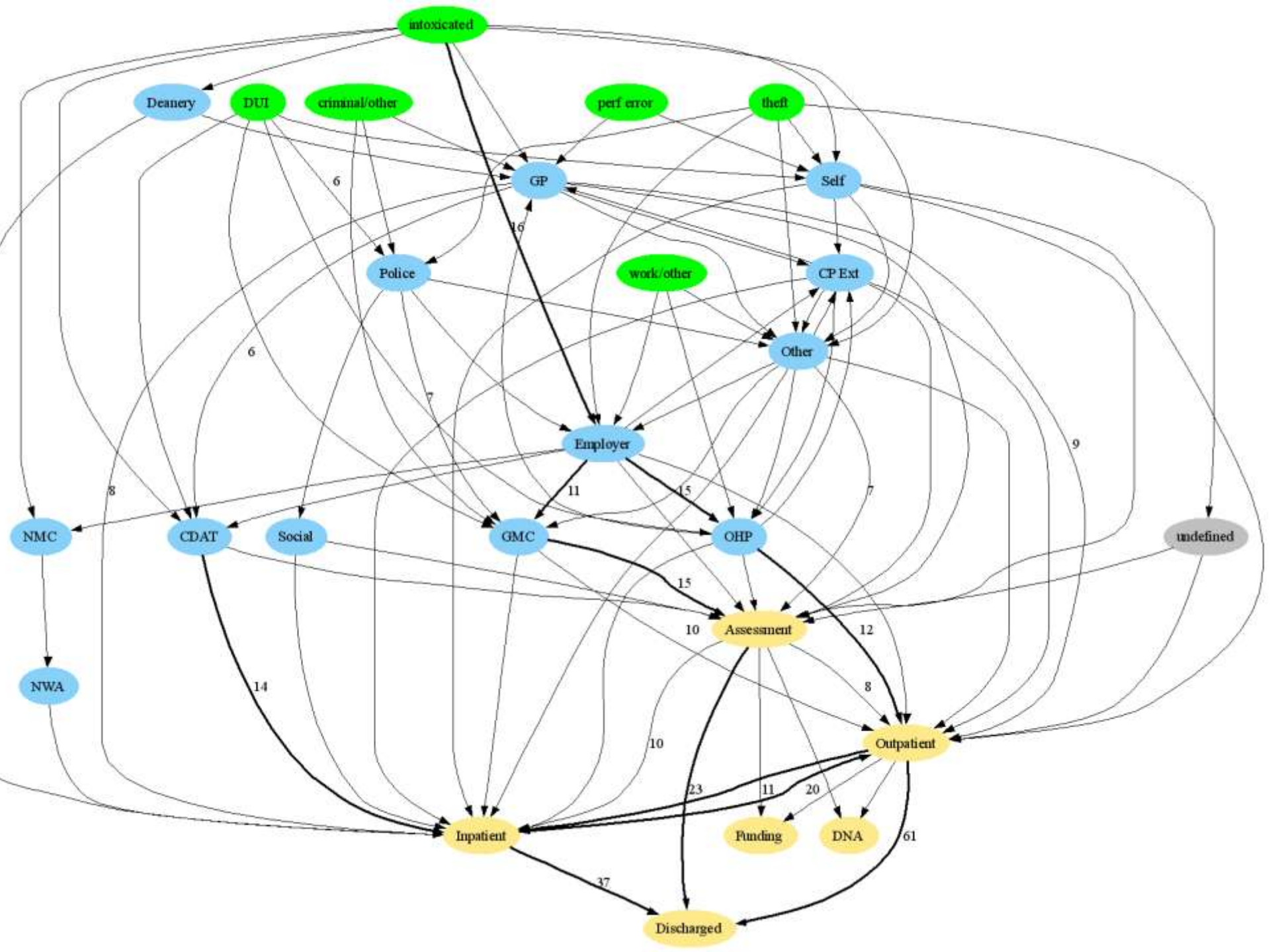
Visual Representation of all complete Primary Pathways of Referral to the Service (n=130)



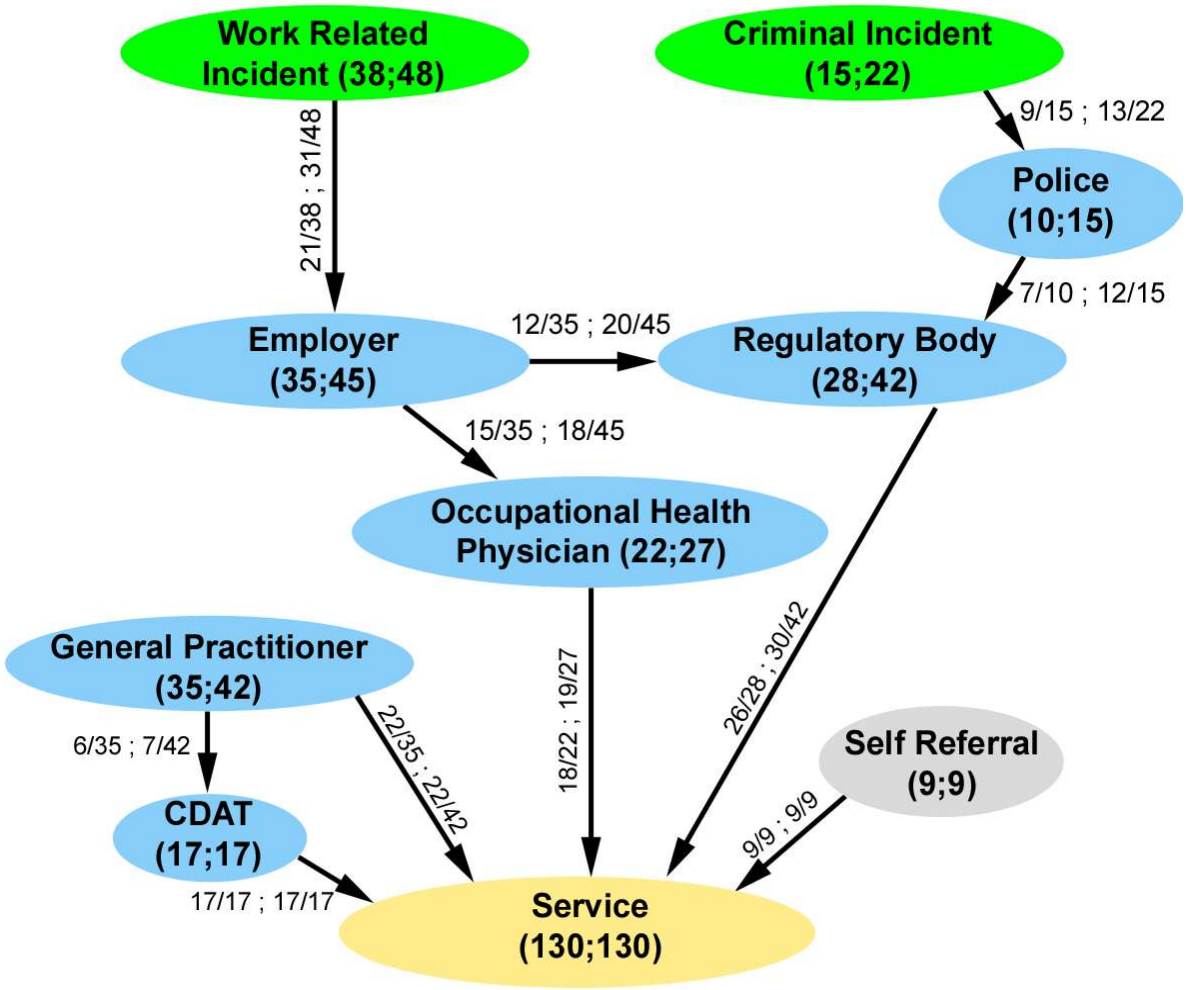

GP
Police
OHP
Social
CDAT
Inpatient
CP Ext
Assessment
Other
Self
Employer
Deanery
GMC
Outpatient
Discharged
DNA
Funding
11
16
19
14
17
11
17
20
17
25
17
15
64

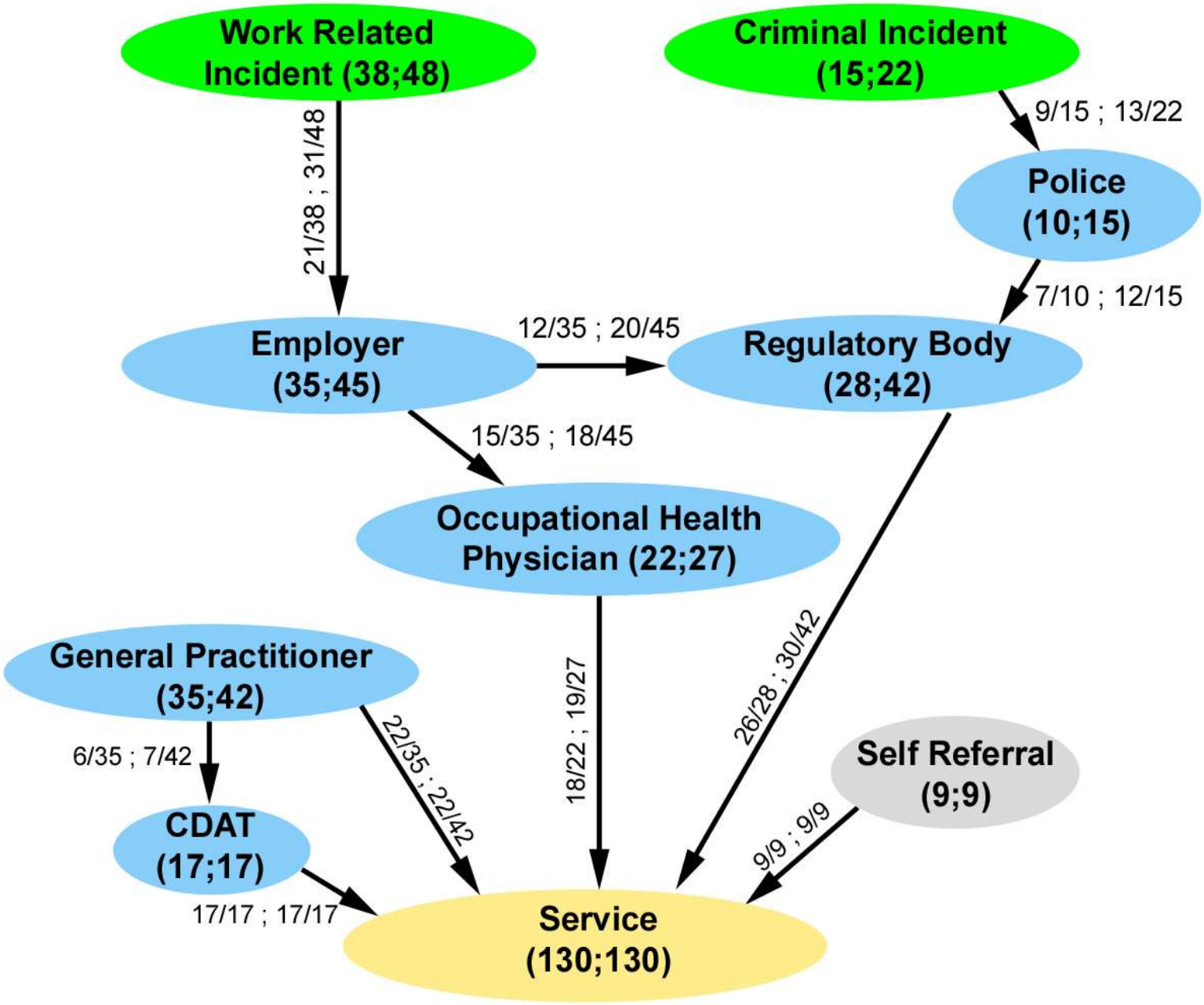
Visual Representation of all Primary Critical Pathways of Referral




intoxicated
Deanery
DUI
criminal/other
perf error
theft
GP
Self
Police
work/other
CP Ext
Other
Employer
NMC
CDAT
Social
GMC
OHP
undefined
Assessment
NWA
Outpatient
Inpatient
Funding
DNA
Discharged
6
16
6
7
9
8
11
15
7
15
10
12
14
8
10
23
11
20
61
37

Frequency of pairings of nodes which occur on the primary critical pathway and primary pathway




Work Related Incident (38;48)
Criminal Incident (15;22)
21/38 ; 31/48
9/15 ; 13/22
Police (10;15)
7/10 ; 12/15
Employer (35;45)
12/35 ; 20/45
Regulatory Body (28;42)
15/35 ; 18/45
Occupational Health Physician (22;27)
General Practitioner (35;42)
6/35 ; 7/42
22/35 ; 22/42
18/22 ; 19/27
26/28 ; 30/42
Self Referral (9;9)
9/9 ; 9/9
CDAT (17;17)
17/17 ; 17/17
Service (130;130)