

Improving outcomes for adults often overlooked by traditional care models

Alcohol-related harm: A significant public health challenge in England



Impacts

patients, the NHS and society



Estimated to cost **£27.4 billion** annually¹



Patients who use acute hospital services frequently due to heavy drinking often have complex social, financial and psychological needs, such as poor mental health, unstable housing and poverty.

Gaps in existing care models can mean these patients:

- fail to receive appropriate support
- have longer admissions and more re-admissions
- have a higher mortality rate than any other patient group²



As part of the NHS Long Term Plan,³ **Alcohol Care Teams (ACTs)** were set up in areas experiencing the highest levels of alcohol-related harm.

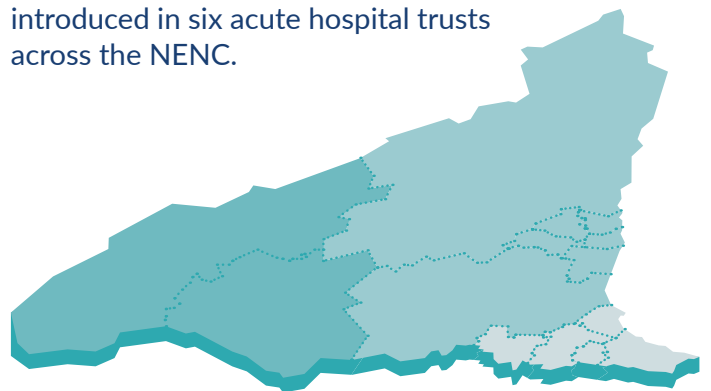


The North East region is particularly affected,⁴ with the highest rates of unplanned alcohol-related hospital admissions in the country.⁵

Route to recovery through the Alcohol Recovery Navigator Service

The North East and North Cumbria Integrated Care System (NENC ICS) launched the Alcohol Recovery Navigator Service in 2023 to complement the work of ACTs.

Six Recovery Navigators were introduced in six acute hospital trusts across the NENC.



- North Cumbria (Cumberland, Westmorland and Furness)
- North East Mayoral Combined Authority
- Tees Valley Combined Authority

The service:

- identifies heavy drinkers who need additional support
- helps heavy drinkers access community services, such as:
 - recovery services
 - housing
 - welfare advice

¹ Institute of Alcohol Studies (2024) [Economy Factsheet](#).

² Blackwood, R. et al. (2020) [Prevalence and patterns of hospital use for people with frequent alcohol-related hospital admissions, compared to non-alcohol and non-frequent admissions: a cohort study using routine administrative hospital data](#), *Addiction*, 116(7) 1700–1708, Society for the Study of Addiction.

³ NHS (2019) [The NHS Long Term Plan](#).

⁴ Office for National Statistics (2022) [Alcohol-specific deaths in the UK](#) - Office for National Statistics.

⁵ Office for Health Improvement & Disparities (2023) [Local Alcohol Profiles for England: short statistical commentary](#).

To evaluate the impact of Recovery Navigators in the NENC, we:



Analysed routinely collected electronic hospital data (Apr 2019–Mar 2021) for adults with three or more recent alcohol-related hospital admissions.

There was a high mortality rate in these individuals, who would have qualified for Recovery Navigator support.



Examined data from three of the NHS Trusts involved to understand the characteristics of the patient group:

- Referred patients were mostly middle-aged men
- 42% of patients seen (342 people) had one or more risks documented⁶



Conducted interviews with:

- 7 patients supported by Recovery Navigators
- 1 carer
- 17 healthcare staff, including Recovery Navigators, ACT nurses and community recovery providers
- across 5 NHS Trusts in the NENC

Patient engagement with key services increased as they worked with a Recovery Navigator

Percentage of patients in contact with ACTs:

7% initially  24% by the end

Percentage of patients in contact with mental health services:

77% initially  80% by the end



85% of patients identified as potentially eligible for support from a Recovery Navigator (2,271 people) were referred to at least one other support service by the end of the evaluation



70% of patients who went on to be seen by a Recovery Navigator (997 people) received an onward referral to community alcohol support services, with some referred to services for broader health and social needs (Figure 1)

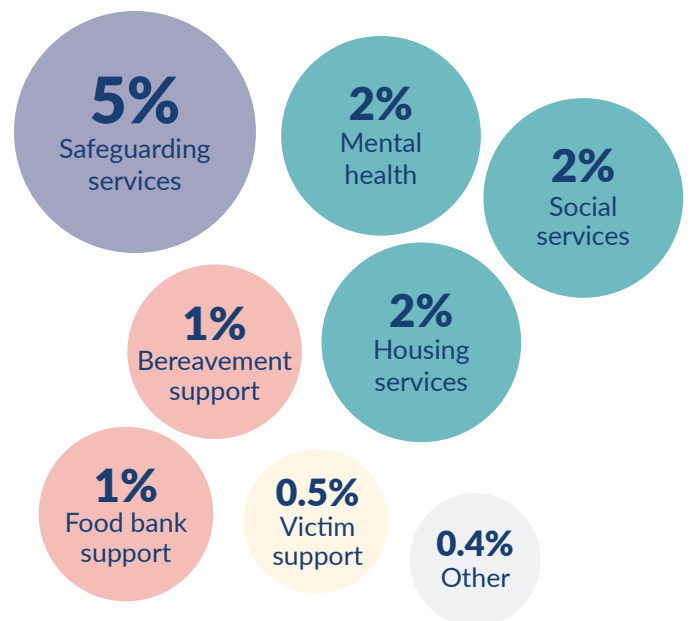


Figure 1: Percentage of patients referred for additional support services

⁶Data access gap: despite our coordination with ACT leads and embedding data requirements into contracts, NHS Trust information teams lacked the capacity to process the additional patient-level data. Including these teams in early evaluation discussions would have improved data access and facilitated a smoother evaluation process.

Service valued by patients, carers and staff



Patients and carers appreciated Recovery Navigators' empathetic and holistic approach to providing individualised support when they needed it.



Staff valued the Recovery Navigators for fostering trusting relationships with patients, enabling open conversations, and for its close collaboration with the ACT.



Recovery Navigators worked mainly within hospitals with some offering post-discharge support by phone and others face-to-face.



The fact that there is a team that has time to dig a bit deeper and figure out actually what has caused you to come in is really important. As much as I'd love to have half an hour...to speak to each patient that comes in for their social issues, you just don't have the physical time."

- staff participant, doctor



We were seeing him two and three times a day because he was at a crisis point. There were all sorts going on there, so I just persisted. As a navigator, that was sitting with him, defusing the situation and exploring his triggers."

- Recovery Navigator



Yeah, talking about, home situation [...] what I did for a job, what my children are like, and how often I see them, [...] she gets a better picture of you, rather than just looking at alcoholism, and the effects it's had on you."

- patient supported by a Recovery Navigator



Trust, another important word, yes. Because having been in denial for so long, actually opening up, feeling that I can trust somebody, that's hugely important."

- patient supported by a Recovery Navigator

Recommendations to ensure patients receive vital support in their recovery journeys

1. Employ comprehensive performance measurement

Health service commissioners and future evaluators should implement systems to assess the impact of Recovery Navigators effectively.

Systems should incorporate:

- health economic measures to assess value for money and
- creative tools to capture patients' evolving recovery stories



When [the Recovery Navigator] gets a success that somebody is abstinent it's really, really, positive. However, I think success is just knowing that you've done everything that you can to support them in how their behaviour changes at that time. Sometimes it's not always about bed days in hospital and reducing admission. Sometimes it is just about being there for the person, being that advocate."

- ACT nurse

2. Improve training and career opportunities for Recovery Navigators

NHS trusts should enhance contractual security for Recovery Navigators, support stronger links with community providers and offer ongoing career development opportunities.



I think if we know that the role is going to be secure that is much better. Because I know quite a lot of Recovery Navigators in hospitals have already moved on, because they don't know their job is secure."

- ACT staff member

3. Advocate for wide scale implementation of Recovery Navigators

The integrated Care Board (ICB) should promote the benefits of these roles at regional and national forums, highlighting the service as an effective component of a multifactorial strategy to reduce alcohol-related health inequalities.



Ward staff are fantastic. But obviously they are extremely busy. Or addiction may not be their specialist field. To have a dedicated worker like [the Recovery Navigator] who, you know, knows why I'm there and can offer me a way out - there's not many things worth going into hospital for but that's certainly been one of them."

- patient supported by a Recovery Navigator

The Alcohol Recovery Navigator Service engages and supports adults who often have multiple complex needs and are currently underserved by statutory services and traditional models of care. Implementing this service effectively will ensure that patients frequently overlooked by health services receive this vital support, both regionally and nationally.

For more details, visit the [project website](#) or contact Dr Emma-Joy Holland Emma.holland@newcastle.ac.uk.



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