Results

vice following a request for further treatment for AUD elicited appointments were compared to identify each referral methods effect.

Conclusion

detected.

of patient records on Patient First A+E records system.

Results

Since the inception of the ALN service, year on year the figures show a reduced number of re-attendance. Since the inception of the ALN service 1688 patients received a brief intervention, the number of attendances 12 months pre BI were 3814, with 2155 in the 12 months following BI. This shows a reduction of 43%. Based on National Indicators on average, each alcohol related A&E attendance costs £80 (NHS evidence ID:10/0021 2012), this suggests a Trust saving of £132,720.00 over a four year period.

Conclusion

These results confirm the efficacy of BI delivered by an ALN service in district general hospital based emergency departments. As a result of these findings other departments within our Trust are developing identification of Alcohol use disorders and Brief Interventions.

Disclosure of Interest

None Declared.

# PTH-124 ACTION LEARNING SETS TO SUPPORT SPECIALIST SCREENING PRACTITIONERS

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Introduction

Bowel Screening Wales (BSW) have undertaken a pilot to provide evidence which will consider the benefits of Action Learning Sets to Support Specialist Screening Practitioners.

Methods

Action Learning Sets (ALS) are a powerful problem-solving process widely used in nursing and other organisations to help staff develop their own skills in resolving workplace issues by using enhanced communication in a group setting. It can help build teams, support individuals, develop self-awareness, promote professional development and improve leadership skills. Allocating time for one-to-one meetings for clinical supervision can be difficult to maintain. ALS could be developed to enable SSP peer-group learning. A pilot will commence in one LAC in January 2013 and will create a mechanism for setting up action learning, enabling discussion of the options and the practicalities of setting up ALS. A Bowel Screening Wales, Regional Nurse would take on the initial facilitator role. This would help to ensure progress is maintained and to encourage and shape ALS, with a view to training up internal facilitators for future sets in other LACs. The ALS would become self-facilitating but this would only be done once the SSP’s are experienced in the methodology. Those involved in the pilot would need to agree how the ALS pilot will be evaluated, one possibility would be to ask members to write a reflective account of their experience of participating and how it influenced their practice and professional development.

Results

The feedback from the results will be considered and the process consent process modified accordingly. The results of the pilot will help BSW focus on finding out how ALS could enable SSP peer-group learning, development and support providing peer supervision, identifying strategies for leading service developments and providing a focus for problem solving and reflection workplace issues. Also needing consideration is how the pilot, if successful, could be conveyed to other SSP’s working within Bowel Screening Wales, SSP’s working within other UK Bowel Screening Programmes and other Specialist Nurses working within the symptomatic service.

Conclusion

ALS for SSP’s would ensure continuous professional development and could represent an empowering approach for SSP’s advanced practice, helping them to develop their own practical solutions to workplace problems and issues. ALS is a dynamic and evolving group process. The approach would require commitment but ALS is a relatively straightforward way of...