

HISU engagement feedback

One of the key insights from the feedback we gathered suggested that the name High Intensity Users Service could be negatively understood by the person being supported, suggesting that they over-use certain services, creating a sense of burden and guilt. In reality, we know the reasons they frequently use services, such as A&E, 999, or NHS 111, are often beyond their control because the root cause of their care needs is not being addressed.

We pulled together a number of alternative names for the service with the help of patient representatives and those involved in the review, and asked people to vote for their preferred option.

Based on the outcome of the vote, the future version of the service will be called the **Positive Lives Service**.

We are now using what we have learnt from the review to develop the new Positive Lives Service model which will be launched next year following a procurement process.

What people told us is important about the service...

- Multi-disciplinary Teams and multi-agency working was referred to by all stakeholders for both services as an important element of the success of the service.
- Freedom to be creative, autonomous and flexible was another major strength of the service put forward by the HIU Lead Workers, leaving them able to get to know individuals, develop rapport, and provide true holistic support and guidance wrapped around the needs of the individual.
- Focus on the person, and the service driven by the needs of the individual as opposed to finance, costs, outcomes or strict processes and paperwork.
- The importance of HIU Leads having the right skillset to support people who often have very complex and intense needs.
- Awareness of and engagement with the service from across the health and social care system.
- Making a positive difference to individuals, who may otherwise fall through gaps in between services.

What people told us are the key challenges for the service...

- Information sharing between organisations involved in providing care or support for the individual.
- The name of the service was felt can often lead the individual feeling as if they are at fault, or to blame. When in reality, a lot of the multiple A&E attendances are not through choice, but through other services not meeting the person's needs in the right way.
- Data collection and reporting.
- The time to engage with service users. Sometimes individuals can require support for several months, and return and reappear again months afterwards.

