

HiSLAC

High-intensity Specialist Led Acute Care

Website: www.hislac.org
 Twitter: @HISLACProject

Background

The HiSLAC project is a national project funded by the National Institute of Health Research (NIHR) Health Service and Delivery (HS&DR) Programme.

The aim of the study is to determine whether having more specialists in hospitals at weekends improves outcomes for patients admitted as medical emergencies. The project will also undertake a health economics analysis of the impact of increasing specialist provision across the NHS. The HiSLAC project will contribute to the evaluation of NHS England's 7-day services programme.

Phase 1

- Develop metrics for HiSLAC and map current levels of 'penetration'.
- Acquire HES/ONS data for acute (unplanned) admissions. Estimate the number of admissions and acute beds at NHS Trusts in England.
- Construct a health economics model to examine the cost-effectiveness and budget impact of HiSLAC.
- Undertake a review of the literature around weekend-weekday mortality difference.

Phase 2

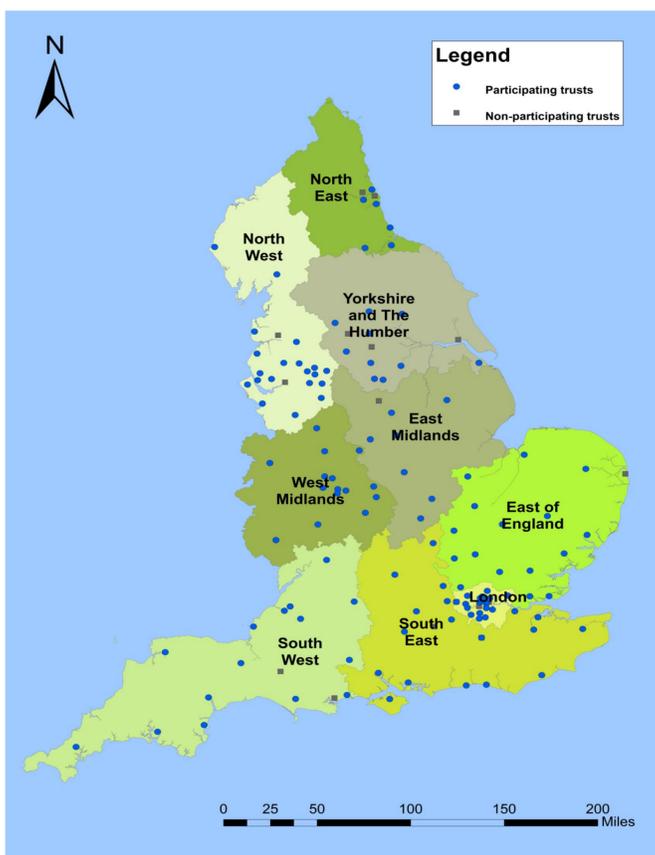
Phase 2 is a detailed quantitative and qualitative study with two workstreams.

- **Workstream A: NHS System-level analysis** of emergency (unplanned) admissions to all English NHS acute Trusts.
- **Workstream B: In depth hospital comparison study.** A detailed cross-sectional mixed methods analysis of emergency non-operative admissions to 10 HiSLAC hospitals and 10 low-intensity (LoSLAC) hospitals.

Implications for Practice

NHS England requires Trusts to introduce 7 day working 'at scale and pace'. This gives HiSLAC the opportunity for contemporaneous evaluation of these large-scale changes in healthcare delivery as they occur. We expect our results to have the following impact:

- Determine whether the impact of implementing HiSLAC justifies or even fully offsets the workforce costs.
- Provide a solid evidence base and implementation guidance material to assist hospitals in making the business case for, and implementing HiSLAC.
- Evaluate the impact of the transition to 7 day working and to understand factors likely to impede or enhance the effectiveness of this change in practice.
- Support the NICE clinical guideline group on service delivery for acute medical emergencies, and refinement of methods for quality assessment in circumstances where explicit criteria are insufficient.



126 acute Trusts across England are participating in the HiSLAC Project with a Local Project Lead nominated at each Trust.

Endorsed or supported by:



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