

Emma Kitching and Gill Irwin work under the umbrella term Health Early Action Team (HEAT). The role includes working as Hospital Alcohol Liaison Specialist Nurses (HALS) and working as part of the Familiar Faces Team.

Emma and Gill were seconded into their roles 13 months ago and the roles became permanent nine days ago. Emma has carried out previous secondments with the team and worked bank shifts for the service and was the Alcohol Link Nurse on the Acute Medical Unit (AMU) for several years.



Emma and Gill are hospital-based and work from the Royal Lancaster Infirmary (RLI). There is currently no HALS at Westmorland General Hospital and Furness General Hospital but Emma and Gill advise where possible. This will hopefully be looked at in the future.

Emma and Gill work with Alan Dowswell, Hospital Alcohol Liaison Nurse, and Anne McCafferty, Care Navigator for Familiar Faces. Bernadette Marshall will join the team in the next few months.

What experience did you need to obtain your role?

Emma said: “I worked as a link nurse on the AMU, I asked the HALS team if I could work bank shifts for them and they trained me. I then waited until a job opportunity arose and I applied for it.

“I have been an acute medical nurse since I started nursing which has given me a good background for this role, as this included working with patients with substance misuse. I do a lot of self-studies and we have recently attended, with Gill, a liver specialist conference in Birmingham.”

Gill said: “I have been an Accident and Emergency (A&E) nurse for the past 17 years and five years before this I was based in Acute Surgery.

“I have been the Mental Health Lead in the Emergency Department for the past four years and during this time worked alongside the Familiar Faces team. I have a career-long interest in substance abuse.”

What does your role involve?

Both: “Assessing anyone who attends the RLI with alcohol or drug addictions. We try to ensure if admitted that they are on the most appropriate treatment for alcohol/drug withdrawal and other alcohol-related conditions, such as Wernicke's encephalopathy.

“We ensure they are continuously assessed, supporting the ward staff. We discuss the reasons behind their addiction and appropriate ongoing community support and refer where required. If homeless we complete duty to refer forms and liaise with appropriate community services to assist them.

“We work closely with the Mental Health Liaison Team (MHLT) for anyone with a dual diagnosis and complete joint assessments. Complete Safeguarding, and referrals where required. We also engage closely with community drug and alcohol services.

“We are part of several Multi-Disciplinary Team (MDT) meetings as part of the Familiar Faces services.”



What have been the best bits of your role?

Both: “Building therapeutic relationships with patients and professionals. Using our experience in nursing to help people in the journey, giving holistic care. Being part of improving the service to give the best care for patients.”

What have been the challenges of your role?

Both: “Not being able to fix everyone's problems. Limited community resources. Patients representing with the same issues can be frustrating as you are limited in how much you can do for them.

“Patients under the influence of substances can be hard to engage with and often leave before we can assess them.

“Staff not always understanding the reasons behind someone's behaviour and lack of education, which we intend to improve on.”

Top tips for people wanting to become a Health Early Action Practitioners/Alcohol Liaison Specialist Nurse:

Both: Be focused and determined. Do your research and self-study. Put yourself out there, volunteer or ask if you can shadow someone. Seek out opportunities. Speak to service users.

How can I find out more?

- You can contact the team by emailing health.earlyaction@mbht.nhs.uk
- Staff can contact the team by calling x512282 (internal) or bleeping x3395.