

For publication

Falls prevention pilot and health intervention programmes

Meeting: Community, Customer and Organisational Scrutiny Committee

Date: 11 July, 2019

Cabinet portfolio: Health and Wellbeing

Report by: Assistant Director, Health and Wellbeing

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Purpose of reviewing the topic	<ul style="list-style-type: none">• To review the pilot of the Falls Prevention work being undertaken within the borough and its contribution to the Council Plan objective of: 'Help our communities to improve their health and wellbeing'
What are the objectives of the review?	<ul style="list-style-type: none">• To review the pilot of the Falls Prevention work being undertaken within the borough• To assess the impact of the Falls Prevention work in improving the health and wellbeing of communities and how this could be evaluated• To consider whether and how the pilot could be applied more widely given the range of stakeholders engaged.
Key Issues for Review	<ul style="list-style-type: none">• How the pilot of the Falls Prevention work will be undertaken<ul style="list-style-type: none">• Who will be included in the pilot?• Who will conduct the pilot?• What are the objectives of the pilot?

	<ul style="list-style-type: none"> • What activities / information will be undertaken / provided? • How the impact of the pilot will be monitored / assessed • How the Council will be involved and its potential influence • How lessons from the pilot could be applied more widely
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1.0 **Background**

1.1 Falls involving older people has been identified as one of the main issues for STP Places to focus upon to take a pro-active approach to reducing demand for health and social care services.

1.2 The Derbyshire STP challenge around falls is shown in the below linked infographic:



2.0 **Current position and key milestones**

2.1 The proposed place based pilots to reduce falls would have a number of elements and reflect the Derbyshire Falls Pathway:

2.2 Information and awareness raising about falls risks and falls prevention both amongst older people (OP) and professionals (health care and non-health care in regular contact with older people including practice staff, pharmacists, community nurses, housing wardens etc.).

2.3 For older people we would want to provide information (posters, leaflets etc.) at places that older people regularly use (GP Practices, Pharmacies, Libraries etc.)

and use other opportunities to raise awareness e.g. District Council newspaper. We would train a group of 'Falls Champions' who would seek to engage older people using a settings based approach – churches, luncheon clubs, other OP groups to raise awareness. As part of this work we would seek to encourage OP to seek to reduce their risk by joining Strictly No Falling, getting vision checked, home modifications, etc.)

- 2.4 For healthcare and non-healthcare professionals we would provide guidance and a short training session on falls risks and prevention.
- 2.5 The revised GP contract from July 2017 requires GP's to identify individuals who are severely and moderately frail, and for those who are identified as severe, consider their falls risk.
- 2.6 We propose to extend this to those individuals identified as moderately frail, non-conveyed fallers attended by EMAS/Falls Alarm Response Service who are identified as being at higher risk of falling.
- 2.7 Chesterfields pilot will consider the following approaches; Information and Awareness plus multi factorial risk assessment and appropriate interventions
- 2.8 To support the implementation of the project within each Place additional funding would be provided from Public Health.
- 3.0 **Barriers/obstacles**
- 3.1 The pilot project is due to go live in August which will test the principles outlined above. It is anticipated that the pilot will help identify issues / barriers that will then be reported along with mitigation strategies to resolve.

4.0 **Future plans**

- 4.1 The pilot project is seeking to test a multi-disciplined approach to addressing the challenges of frailty and those at risk of falling. It is through the pilot that opportunities will be developed to address identified issues.
- 4.2 It is anticipated that through the scrutiny process we will be able to report on the successes achieved through the pilot and the positive influence that this will have in terms of supporting those who are frail.
- 4.3 A range of partners are involved in the pilot to ensure that as far as is reasonably practicable where issues are raised we are in a good position to make the required changes. Partners include; Wheatbridge Surgery, Derbyshire Community health Services NHS Foundation Trust, Chesterfield Borough Council, Clinical Commissioning Group, Voluntary Sector and Derbyshire County Council.

5.0 **Conclusion**

- 5.1 The pilot seeks to better understand the wider determinants of effective intervention for those who are frail and at risk of falling. The scope of the project includes information and awareness as well as detailed personal risk assessments will provide comprehensive data to inform futures ways of working for those involved in the support and care of those who are frail.

6.0 **Suggested scrutiny activity**

- 6.1 In addition to this specific project regarding frailty and falls prevention, the leisure function within the council delivers an exercise referral programme that positively contributes to support and prevention.

- 6.2 Exercise by Referral Derbyshire Framework aims to support people to live healthier lives across Derbyshire through decreasing physical inactivity and sedentary behaviour, by equipping individuals living with long term conditions with the knowledge, skills, confidence and self-efficacy to maintain long term physical activity behaviour change.
- 6.3 The objectives of the scheme are;
- 6.3.1 To provide equitable access to physical activity services for people with specific medical conditions.
 - 6.3.2 Deliver physical activity services at a range of convenient and appropriate times in locations across the area.
 - 6.3.3 Improve general access to physical activity services by promoting physical activity opportunities in the local area and supporting individuals to develop a Personal Action Plan. This plan should be used as a tool to help individuals participate in a range of different activities to reduce sedentary behaviour and increase physical activity levels and sustain this long-term.
 - 6.3.4 Ensure the intervention is guided by the clients' personal goals as identified at the initial assessment and included in their personal action plan.
 - 6.3.5 Highlight potential physical activity opportunities for clients and their families to participate in; for example walking groups, community and leisure based activities.
 - 6.3.6 Help individuals and families to sustain behavior change to benefit their long term health, with an emphasis on increased physical activity levels long term.
 - 6.3.7 Link effectively with Primary Care, other healthcare professionals, Live Life Better

Derbyshire services and other physical activity partners to ensure pathways are integrated to Health Referral and other wider physical activity options.

6.3.8 Develop and follow a clear pathway for the client from the point of referral to a supported programme of activities.

6.3.9 Support the development of specialist programmes including cardiac, pulmonary and cancer rehabilitation

6.4 Due consideration regarding the delivery and impact of this service would help to provide further information regarding the proactive steps being taken to support communities to engage in regular physical activity.

Document information

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Background documents (These are unpublished works which have been relied on to a material extent when the report was prepared.)	
Appendices to the report	