

REPORT TO: Health and Wellbeing Board
DATE: 15th January 2014
REPORTING OFFICER: Strategic Director, Communities
PORTFOLIO: Health and Wellbeing
SUBJECT: Falls strategy

1.0 PURPOSE OF REPORT

1.1 To update the Board on progress in relation to the implementation of the Halton falls strategy and plans that are in place for the future.

2.0 RECOMMENDATION: That the Board note the report.

3.0 SUPPORTING INFORMATION

3.1 There is clear evidence on the importance of ensuring that falls prevention and falls care are a high priority within any Local Authority. Halton has a falls rate that is higher than the national average. The hip fracture rate in people over 65 in Halton is 499 per 100,000, this is significantly higher than the national average of 452 per 100,000 people and when you consider that 1 in 3 people over 65 will have at least one fall per year you can see the scale of the problem.

3.2 The Halton falls strategy covers 2013-2018 and aims to address a number of issues that Halton faces including the level of falls, hospital admissions, readmissions and fractures. The strategy identifies 8 key deliverables that form the basis of the strategy:

- 1. Develop current workforce training**
- 2. Develop a plan for awareness raising with both the public and professionals**
- 3. Improve partnership working**
- 4. Set and deliver specific targets to reduce falls**
- 5. Develop an integrated falls pathway**
- 6. Develop a prevention of falls pathway**
- 7. Identify gaps in funding of the pathway**
- 8. Improve Governance arrangements to support falls**

3.3 Progress against deliverable 1 – Develop current workforce training

Specialist falls training has been delivered to 6 members of staff from Bridgewater, this has increased the training capacity within the sector, but has also increased the falls specialist nurse capacity to deliver falls assessment and clinical interventions. A 12 month programme of training for professionals is being developed and will form the substantial part of skilling up the current workforce.

An initial falls awareness session was delivered in January 2013 and a second one

has been arranged for January 13th 2014. These sessions are delivered free of charge by the Royal Society for the Prevention of Accidents (ROSPA). The sessions are for 20 staff and are focussed on raising awareness of the environment. The session next year will be targeted at community groups, voluntary sector, Community safety groups and faith groups who access people's home on a regular basis.

3.4 Progress against deliverable 2 – Develop a plan for awareness raising with both the public and professionals

Falls awareness week in July saw a range of activities from dance to slipper exchanges. The week was delivered in partnership between Halton Borough Council, Bridgewater, Halton Housing Trust and Wellbeing Enterprises. 326 people attended at least one event over the course of the week. This is by far the biggest awareness raising event we have conducted in Halton and there is an evaluation report attached at appendix 1. Plans for next year will begin in January and despite the success of this year, it is anticipated that we will run a number of smaller events in different communities, thus taking the message to the public.

3.5 Progress against deliverable 3 – Improve Partnership Working

This can be clearly evidenced in the falls awareness work which showed that working across a number of partners could have a bigger outcome. The falls steering group is also working across a number of organisation and is currently working on information sharing protocols to support data collection across Local Authority and Health.

3.6 Progress against deliverable 4 – set and deliver specific targets to reduce falls

The strategy identifies 7 separate targets that are designed to measure the effectiveness of the falls interventions in the borough. Some of the data can only be collected on an annual basis and some has not been collected previously, however we can report the following:

- Reported hospital admissions in over 65s due to a fall reduced by 7.7% (target 5%) in quarter 1 (compared to baseline)
- A 31% (target 10%) increase in referrals to the falls service. This has been managed by redesigning the training and increasing capacity in the falls service.
- A 16.6% (target 5%) decrease in readmissions to hospital where the original admission was due to a fall in over 65s.

Although these figures are encouraging more work needs to be completed in relation to screening, care homes, impact of falls and prevention. These figures are the initial performance from quarter 1 and will be reported on a quarterly basis to illustrate progress.

3.7 Progress against deliverable 5 – Develop an integrated falls pathway

This was completed as part of the strategy and is currently being finalised ready for rollout across Halton. Part of this process has been to build service capacity and skill

up other areas of the system, which has occurred. As part of the annual review of the falls strategy the pathway will be evaluated to understand its efficacy, this will take place in October 2014.

3.8 Progress against deliverable 6 – Develop a prevention of falls pathway

This was also completed as part of the falls strategy and whereas it initially was a stand alone pathway became part of the overall integrated falls pathway as mentioned 3.7.

3.9 Progress against deliverable 7 – Identify gaps in the funding of the pathway

This is a piece of work that has not yet been completed, most of the work that has been led by the falls steering group has focussed on building capacity in the existing services by redesigning the current delivery methods. This has been really successful in the short-term, however for the longer term sustainability of the falls work there will need to be more clarity on the financial position in Halton. This will be the priority of the steering group for 2014.

3.10 Progress against deliverable 8 – Improve Governance arrangements to support falls

Before the falls strategy was developed falls were not considered separately. The topic was subsumed in other boards and this often meant that they were not recognised as a priority locally. The first step was to establish a falls steering group that has been operational for 12 months and oversees the implementation of the strategy. The strategy has also been signed off through both the Local Authority and Clinical Commissioning Group Management Teams. Finally this update report will be presented to Council members and the Health and Wellbeing Board in early 2014.

4.0 POLICY IMPLICATIONS

4.1 There is limited national guidance in relation to falls although there is a wealth of academic research into the importance of fall prevention and the impact of falls on an individual.

4.2 In terms of National papers, the National Service Framework for Older People 2001 was the last document that specifically mentions falls, however there have been a number of Government documents since then that recognize the importance of falls. For example Healthy lives, healthy people, the Darzi review and the recent Dilnot report.

4.3 In addition there is a specific NICE guidelines on falls that were drawn up in 2004, reviewed in 2011.

5.0 OTHER/FINANCIAL IMPLICATIONS

5.1 As mentioned above in section 3.9 a separate business case is being developed to assess the gaps in funding to deliver the full pathway. It is important to note that the progress that has been made this year has been due to a successful partnership

approach as there has been no additional resource added to the service area.

6.0 RISK ANALYSIS

6.1 Risks for implementation of the strategy are identified and reported to the falls steering group on a monthly basis.

7.0 EQUALITY AND DIVERSITY ISSUES

7.1 No issues identified in the Equality and Impact Assessment that was completed for the strategy.

