

UPDATE ON FALLS PREVENTION BUSINESS CASE

To: **Health Committee**

Meeting Date: **16th July 2015**

From: **Dr Liz Robin**

Electoral division(s): **All**

Forward Plan ref: **Key decision: No**

Purpose: To provide the Health Committee with an update regarding the Falls Prevention Project and progress of the Falls Business Case

Recommendation: The Health Committee is asked to receive and note this report

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1. BACKGROUND

- 1.1 The 'Falls Prevention Project' aims to improve the effectiveness of falls prevention in Cambridgeshire. Effective falls prevention promotes independence and improved health and wellbeing outcomes for older people while reducing pressures and costs for health and social care services. Older people, particularly those who are frail or at risk of falling, are a vulnerable population group, necessitating targeted preventative interventions to ensure they can live well and as an integral part of their communities.
- 1.2 The project began in April and will run for 2 years. The project is under the steer of the Older People's Prevention Group (OPPG). This group was formed to ensure integrated and sustainable approaches to preventive interventions for older people and includes members from Public Health, CFA, CPFT, CCS, Cambridge University, Uniting Care (UC) and 3rd sector and patient representatives. Work generated from this group will inform and align with development of the Cambridgeshire Executive Partnership Board Healthy Ageing and Prevention Workstream.

2. UPDATE ON CURRENT WORK

- 2.1 Completed an overview of current falls prevention work in Cambridgeshire through mapping to identify what provision there is across the County; areas of good and / or strong practice, and where there are gaps. This will inform future development and investment in Falls Services to ensure services are integrated, evidence-based and equitable across the County.
- 2.2 Analysis of data relating to falls prevention in both Cambridgeshire and nationally, in order to inform targeting of provision, including a particular focus on targeting individuals 75 years and over
- 2.3 Development of the Health Trainer service following a recently completed tender of integrated lifestyle services, which will see investment in Health Trainers who have specialist falls prevention expertise and who will link closely with wider falls services. 3.5 WTE Health Trainers will be responsible for screening and identifying clients at risk, providing interventions and motivational support for behavioural change, and appropriate referrals to specialist therapy services. Health Trainers delivering this service will, in the first instance, be positioned in areas demonstrating greatest need (e.g. higher rates of falls or hospital admissions, poorer access of falls prevention services, higher numbers of older people). Development of this service has been in collaboration with colleagues from falls prevention services to ensure clarity of roles and referral pathways. Falls prevention staff will also be involved in supporting and providing training to health trainers regarding identifying older people with an increased risk of falling, referring appropriately and providing falls-specific interventions.

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

Effective falls prevention services can reduce health and social care costs.

3.2 Helping people live healthy and independent lives

Falls prevention services will support older people to stay healthy and maintain their independence

3.3 Supporting and protecting vulnerable people

Further development of falls prevention services should make an important contribution to the wellbeing of frail older people.

4. SIGNIFICANT IMPLICATIONS

4.1 Resource Implications

The resource implications of this proposal are outlined in the paper presented at the Health Committee meeting held on 15-1-15 (specifically paras 2.2, 2.3 and 2.7 – see source document)

4.2 Statutory, Risk and Legal Implications

The proposed investment is from the public health ring-fenced grant and therefore must meet the conditions of the grant, including the requirement for services to be free at the point of delivery.

4.3 Equality and Diversity Implications

Please see community impact assessment attached at Annex B of source document.

4.4 Engagement and Consultation Implications

The original proposal included the development of a county-wide falls prevention strategy, which will require consultation with stakeholders and service users.

4.5 Localism and Local Member Involvement

Local health partnerships will need to be fully involved in mapping and gap analysis work, and in ensuring that falls prevention pathways are sensitive to local needs.

4.6 Public Health Implications

The national public health outcomes framework includes rates of hospital admissions for falls and for hip fractures among older people. Implementation of this proposal should improve these outcomes for Cambridgeshire residents.

Source Documents	Location
Paper to Health Committee on 15 th January 2015	http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/AgendaItem.aspx?agendaItemID=10980