Report to Rutland Health and Wellbeing Board

Subject:	Falls Prevention and Management of Falls	
Meeting Date:	24.3.15	
Report Author:	Julia Eames	
Presented by:	Julia Eames	
Paper for:	Note / Approval / Action/Discussion	

Context, including links to Health and Wellbeing Priorities e.g. JSNA and Health and Wellbeing Strategy:

Nationally, falls and fall-related injuries are a common and serious problem for older people. People aged 65 and older have the highest risk of falling, with 30% of people older than 65 years and 50% of people older than 80 years falling at least once a year (Kings Fund). With the elderly population increasing, there is a need to develop strategies to reduce the likelihood of falls and ensure that people who attend or are admitted to hospital following a fall are enabled to return to their usual residence and fewer of them are conveyed or attend Emergency Departments in the first place. Evidence shows that there is a direct correlation between recovery and how long people lie on the floor following a fall.

Reducing injuries due to falls is the local Better Care Fund metric.

The Health and Wellbeing Board agreed to reallocate the funds within the Better Care Fund plan previously identified for a Learning Disability Scheme. The Integration Executive has considered the options and recommends allocating these funds to a 'Falls Business Case'. A draft business case has been prepared, appendix 1.

It is recognised that more robust data is needed as a baseline to ensure resources are correctly targeted and linking this plan with the work of Public Health colleagues is vitally important. However, by using national evidence and combining this scheme with the Better Care Together workstream relating to Falls some initial actions have been proposed.

Data enclosed in the plan from the East Midlands Ambulance Service (EMAS) shows a very large proportion of calls they receive related to falls are classed as 'not an emergency' or 'less serious', suggesting concentrating on universal and preventative approaches should have the greatest impact. By using this approach it is also intended to have a positive impact on the wider health promotion and wellbeing of the older population.

The plan recommends that audit and formal evaluation methods are built into the scheme

Financial implications:

There is a total of £84,000 in the Better Care Fund for this scheme. The plan proposes a wide range of activities to contribute to delivering the objectives using the available resources. The plan proposes developing some existing services and ensuring links with other Better Care Fund Schemes. In addition there is the opportunity for some new initiatives that could be provided by a range of providers, using an approach that seeks best value for money, through services putting forward ideas and costs of what they could provide to deliver aspects of the scheme.

The plan also recommends identifying specific funding for the evaluation to inform future strategies.

Recommendations:

That the board:

- 1. Note the contents of this report and agree with the Integration Executive's recommendation to reallocate the money previously in the Learning Disability scheme to be used for a Falls Prevention and Falls Management scheme.
- 2. Approve the Draft Business Case attached at Appendix 1

Comments from the board:

Strategic Lead:	Mark Andrews		
Risk assessment:			
Time	Н	This work will need to be progressed at pace to have an impact on the metrics in 2015/16.	
Viability	M	This is a very wide ranging plan with many elements that will need careful management to ensure it maintains a clear focus of delivery.	
Finance	M	Clear budget management will be required.	
Profile	M	Falls are seen as a significant reason for the pressures on the acute sector, which has a high profile.	
Equality & Divers	ity L	no specific group of individuals subject to any discrimination.	