

<b>PAF/15/18</b>
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**Committee** People and Families Policy and Scrutiny

**Date** 14 June 2018

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## **TASK AND FINISH GROUP – HIP FRACTURES AND FALLS PREVENTION**

Report by County Councillors Jo Beavis and Dave Harris

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### **Recommendation:**

The Committee is asked to:

- (i) receive the Final Report of the Task and Finish Group that looked at hip fractures and falls in Essex;
  - (ii) consider timing and arrangements for reviewing the implementation of the recommendations;
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### Background

During the summer of 2017 both the Health Overview Policy and Scrutiny Committee (HOSC) and the People and Families Policy and Scrutiny Committee (PAF) received a briefing from Councillor Spence, Cabinet Member for Health, on some of the key issues and challenges in health and social care. One of the issues highlighted during that presentation was that Essex was an outlier from national average for the rate of hip fractures in over 65-year-olds even allowing for local demographics.

A 'follow-up' briefing on hip fractures and falls prevention was provided for both committees in a joint session. Thereafter, a Task and Finish Group (comprising members from both committees) was established to look at aspects around the incidence of hip fractures and falls in Essex.

### Scoping and review

The report details the scoping undertaken and the final approach taken towards the review, the work undertaken and the evidence obtained.

With evidence indicating that most falls happen at the time and location where people spend most of their time (i.e. both private homes and residential care homes) the Group concluded that it would look at the support in place in residential care homes. Such a focus would also give an opportunity for some 'self-focussing' on the support that the County Council specifically provides, how it is embedding the right quality improvement ethos in the care homes where it is making placements and to what extent it is pan-Essex or can become pan-Essex. In addition, whether such a quality improvement ethos could be extended into other settings.

As part of its initial investigations the Group became aware of the PROSPER programme (Promoting Safer Provision of Care for Elderly Residents and subsequently renamed promoting Safer Provision of Care for Every Resident) and agreed that it would focus on the effectiveness and future potential of that programme as the core component of its review. PROSPER is a toolkit and training programme that empowers care home staff to identify and make improvements to how they provide care and to create good practice.

The Group HAS conducted some site visits and spoken to County Council officers and care home staff to inform its review. The Group has been impressed by the potential of the PROSPER programme and that many care homes in Essex have embraced the methodology behind it. The Group has concluded that there is significant potential to extend some, or all, of the programme into other social settings and that there needs to be certainty of future funding to facilitate that.

A list of all the Recommendations are on pages 4-5 in the attached report and reproduced below. As part of considering these the Committee will need to consider to whom each recommendation is addressed, and timing and arrangements for reviewing the implementation of the recommendations.

### Recommendations

#### ***Recommendation 1 (Page 9):***

***That the People and Families Policy and Scrutiny Committee should consider seeking further information on waiting times for occupational therapist assessments and completing adaptations to ascertain if delays could be contributing to a higher incidence of falls.***

Responsibility: Chairman of People and Families Policy, Scrutiny Committee

#### ***Recommendation 2 (Page 10)***

***That County Councillors be encouraged to visit their local care home(s) on an informal basis from time to time to build up a rapport with staff and residents so that they can also see the democratically accountable side of the county council and have an alternative way of raising issues if they so wish.***

Responsibility: TBC

#### ***Recommendation 3 (Page 12):***

***That an annual awards event emphasising quality and improvement in the care sector and highlighting good practice in both service and staff should be supported.***

Responsibility: TBC

***Recommendation 4 (Page 18):***

***That the Group feels there needs to be sustainability and certainty of future funding to enable planning a stable team to consolidate and further expand the reach of PROSPER into other settings.***

Responsibility: TBC

***Recommendation 5 (Page 19):***

***That, whilst participation in PROSPER is not mandatory in the Integrated Residential and Nursing Contract, there should be a requirement to indicate what falls prevention and quality improvements are pursued by the provider (citing participation in PROSPER as an example)***

Responsibility: TBC

***Recommendation 6 (Page 20):***

- (i) That further work should be done to investigate extending PROSPER principles and methodology (adapted as necessary) into other community settings, utilising social prescribing and Community Agents where appropriate.***
- (ii) That work be undertaken to explore the viability of disseminating information on falls prevention via media outlets, social media and the already established Live Well and Living Well websites.***

Responsibility: TBC

***Recommendation 7 (Page 21):***

***That the potential to work jointly with the NHS on future PROSPER work be investigated.***

Responsibility: TBC

***Recommendation 8 (Page 22):***

***That the Health Overview Policy and Scrutiny Committee should lead in receiving a regular update on the rates of hip fractures in Essex, prior year comparisons and identifying ongoing trends.***

Responsibility: TBC