# The Greater Manchester **Falls Collaborative:**

### Community of Learning, Sharing, and Problem Solving:

(12-Month Programme)

Session 2

Wednesday 26<sup>th</sup> June 2024 10:30-10:35am

**Welcome & Overview of the CoLSP Programme** (Beth Mitchell, The Greater Manchester Combined Authority)

10:35-11:15am

**Bolton Falls Tableau Dashboard:** Overview demo of how this is currently used in Bolton (Jason Taylor, Bolton NHS)

11:15-11:55am

Deep Dive into our Falls Prevention Pathway: Bolton (Niall Bradley, Age UK Bolton)

Any actions and close of the session:

**Next meeting: July TBC** 

11:55am-12:00pm















# Mapping Falls Prevention & Support Services Across Bolton







- GM presented a GM Falls Prevention Delivery model at the Falls Collaborative Workshop in October 2022, part of the refreshed approach to the GM Age-Friendly Strategy.
- Part of the refresh was to address and meet the needs of the ageing population.
- By 2041, Greater Manchester is projected to have over 900k residents aged 55 and over (17.2% increase), in the same period, residents aged 65 and over are projected to increase by 29.4% to equate to nearly 600k residents.
- The model, when released, will ask the localities to work as Pan GM to understand the shared objective to prevent falls, support reconditioning, build and maintain good strength, bone health and balance throughout mid to later life.
- The evidence based interventions for falls prevention are: Exercise, Core intervention, Home environmental risk assessments, Medical Checks, Medication Reviews, Strength and Balance Training, Mental Health Interventions.

### **GM Falls Prevention Delivery model**



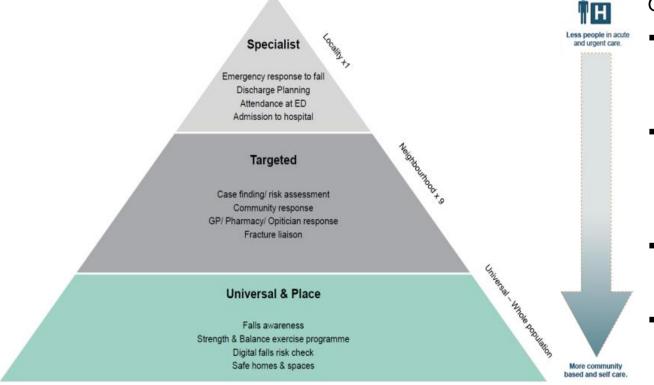
### ...Purposing that approach to falls prevention

Greater Manchester A shared 'Greater Manchester Quality Standards' **Integrated Care** Strategic programme and investment levers Partnership Integrated models of community, clinical and care & Equality pathways · Scaling innovation and technologies Co-creation and co-production Digital · Identification and 'test-bedding' blended models of Evidence-based programmes adopted at scale evidence and intervention Evaluating what works evaluating what that enhance Commissioning to required standards and the evidence-base applies across GM Developing mechanisms for effective sharing Effective use of data (including developing Community of · Diverse and unrestricted membership to enable electronic care records) Enhancing data insight to enable tailored and sharing and · Showcasing and celebrating what works effectively targeted provision to address system inequity across Greater Manchester Holistic person and place-based indicators problem solving Workforce · Developing workforce capacity jointly · Representative workforce to enable true equity of development, access to provision and to reduce barriers recruitment. · Cross-work shadowing and development and training opportunities





In order to meet the proposed GM model objectives, a Bolton mapping document has been developed in terms of what is available across Primary, Secondary, Community/Voluntary and the Local Authority. A joint piece of work was undertaken to understand what the offer is currently, what we can do better to meet the needs of Bolton residents and how can we address the identified gaps and recommendations.



#### Our aims are:

- Collaboratively share the importance of falls prevention across all our organisations
- Improve the visibility of the services/pathways on offer to other health professionals and how to access them
- Improve how we are targeting the right patients at the right time
- Transforming, redesigning, promoting and sharing the offer that is already available

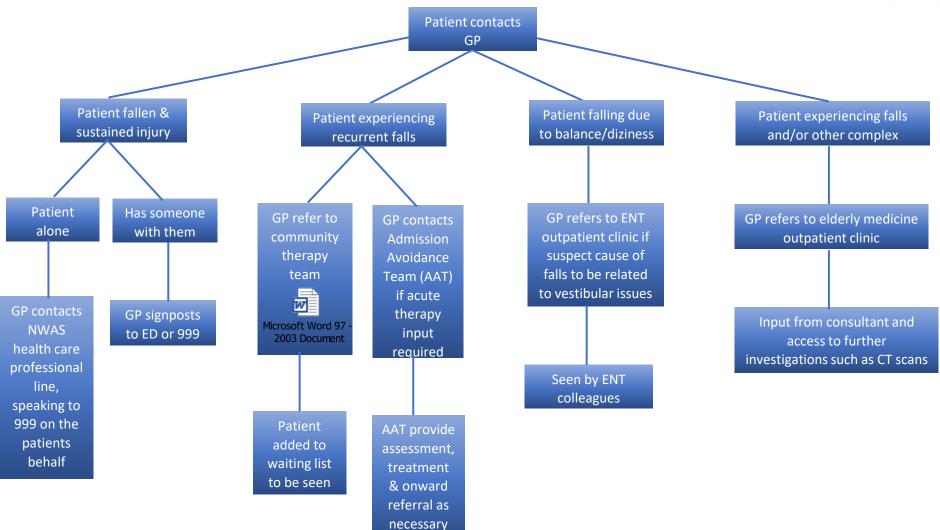


# **Primary Care Pathways**









# Primary Care Falls Prevention



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				Hypertention	



# **VCS** Prevention



### Age UK Provisions & Keep On Keep Up



Tai -chi Chair base	Tai -chi				
	Chair based exercise		Strength & balance		Research publication on
x14 Volunteer Physical Activity Classes		Gentle dance	<b>→</b>	effectiveness of dance	
per week:	V	valking netball	Pulmonary rehab		interventions on falls prevention in older adults has recently been released
·			Tai Chi		
			Low impact circuit		
	Yoga				

 Providers within Bolton are looking to standardise a falls/hazards checklist for use within the area to enable a more joined up approach. The Age UK checklist below will be used as a starting point.

	<b>Bolton</b>
ag	euk

### **Checklist: Hazards in the Home**

#### Use the checklist over the next two pages to identify areas that you can focus on to try and reduce the risk of slips and trips. By making small changes in your loved one's home, you can ensure they are less likely to suffer an accident and injury when you can't be there with them. Bathroom Bedroom(s) Stairs Porch Is there a clear path through the room? Remove all trip hazards from the floor, e.g. shoes, books, magazines, boxes, etc. Are mats/rugs/carpets secured to the floor? Use mats/rugs with a non-slip backing or secure them into place with tape. Are non-carpeted floors slippery? Consider the use of mats, as detailed above, especially in kitchens and bathrooms where spillages can occur. Is there enough space to walk around furniture? e.g. Sofas, tables, shoe racks, bed, drawers, etc. If not, consider re-positioning or placing them in another room, especially if items can be easily knocked off onto the floor. Are there any trailing wires? If the wires can't be coiled up or hidden. consider taping/securing them in place. Alternatively, you could consider asking an electrician to fit another socket. www.ageukbolton.org.uk

### age UK

### **Checklist: Hazards in the Home**

Is there good lighting?	Hallway/ Porch	Lounge	Dining Room	Kitchen	Bathroom	Bedroom(s)	Stairs
If natural light is low, consider touch lamps that can be easily switched on (if there is space) or plug-in motion activated lights.			Ш		ш	Ш	Ш
Are light switches easily accessible? If light switches are not near a doorway, or for example at the top and bottom of the staircase, consider getting an electrician to move current ones or install new ones.							
Are there hand rails and grab rails in relevant places? e.g. On the stairs, near the toilet, near the bath/ shower, near chairs, near the bed, etc. Install fixed hand rails and grab rails, to ensure they are as sturdy as possible.							
Are commonly used objects and items easily accessible? e.g. Kitchen utensils, towels, food items, lamps, telephone, etc. Make sure these items are easily accessible, as close to waist height as possible.							
You might also like to consider a falls a carer or an emergency reponse team							
Contact Bolton at Home about their Care on 01204 335733 or via email at careline					w	ww.ageukbol	ton.org.uk



# **Community Pathways**







During this mapping exercise the following community falls pathways have been identified:

- Admission Avoidance Team (AAT)
- Community Therapy
- Pharmacy
- Independent Living Service (ILS)
- Telecare

<sup>\*</sup>See appendix for full details

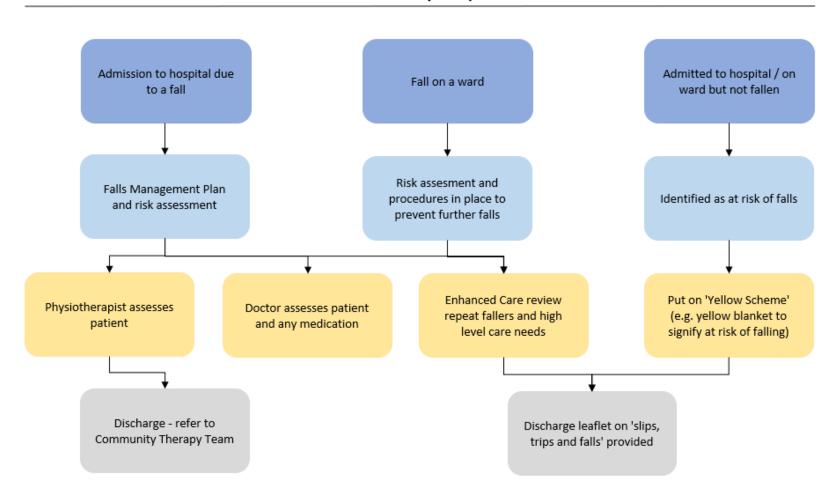


# **Hospital Pathway**





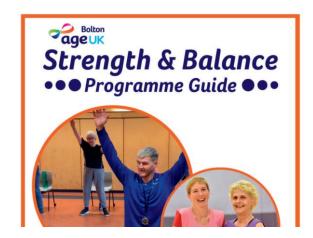
### Falls Pathway: Hospital





### **Key Information**

- Community Therapy Team have a discharge leaflet that includes contact details for both CVS and Age UK – to continue supporting the person beyond discharge.
- Improvement work ongoing in the hospital to support falls e.g. preventative measures such as falls mats to ensure care homes will accept discharges and reduce the risk of falls.
- Hospital teams also use Age UK Strength & Balance Programme & 30 day exercise calendar – Enhanced Care Team give to patients when discharged.





# Potential Gaps & Recommendations



Gaps	Recommendations
Falls Clinic / Service in the community	<ul> <li>Discuss further with the Specialist Consultant to understand what is offered, where and when</li> </ul>
	<ul> <li>Understand why this service was closed</li> </ul>
	<ul> <li>Option to have ACP lead the clinic instead of a Consultant</li> </ul>
	<ul> <li>Provide falls education as part of this – how to fall 'correctly/more safely' and how to get up after a fall</li> </ul>
	<ul> <li>Advice and Guidance – from GP to Consultant on ERS to avoid potentially unnecessary referrals to secondary services</li> </ul>
Utilising Falls Pharmacist / clear pathway	<ul> <li>Encourage professionals to seek advice from the Pharmacist on falls and increase understanding Falls Pharmacist medication reviews – training for wider teams</li> </ul>
	<ul> <li>Develop a clear pathway for hospital to refer to the Pharmacist – more proactive</li> </ul>
	<ul> <li>Option for Falls Pharmacist to refer directly to CVS and Age UK, instead of through Community Therapy</li> </ul>
Falls Conversations	<ul> <li>NHS Health Checks could include a question on whether the person has fallen in the last 6 months – to recognise potential fallers early</li> </ul>
	<ul> <li>Wider conversations with NHS England on the possibility of this</li> </ul>
	<ul> <li>Lower the age for conversations about falls within the Bolton Quality Contract</li> </ul>

### Recognition



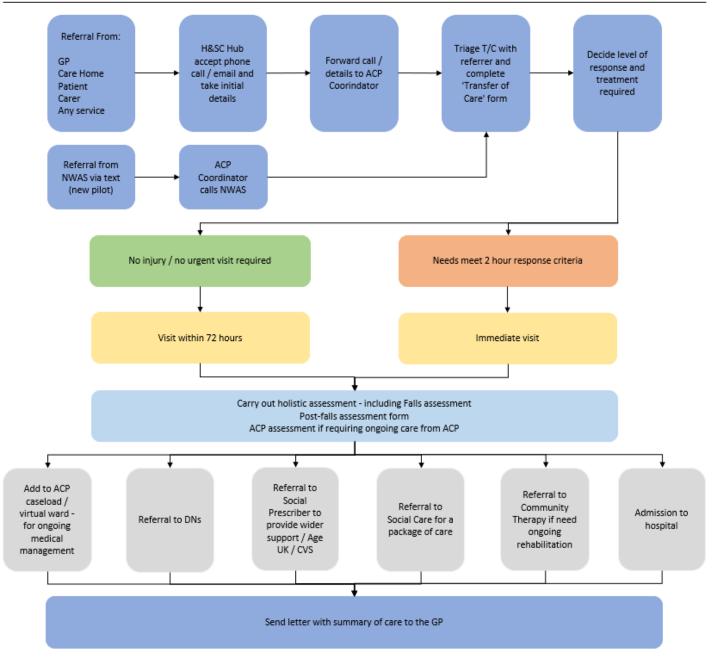
The following people have been involved in ensuring Beth, Abby and Joanne could map falls provision across the system:

- Primary Care Primary Care Clinical Leads: Tarek Bakht & Sarah Mcloughlin and the Primary Care Health Improvement Team
- AAT Helen Arnaud and Duncan Mayoh
- Community Therapy Richard Bent
- Pharmacy Sue Cook and Emma Olembe
- ILS Alison Smith
- Hospital Martina Kingscott and Joy Redwood



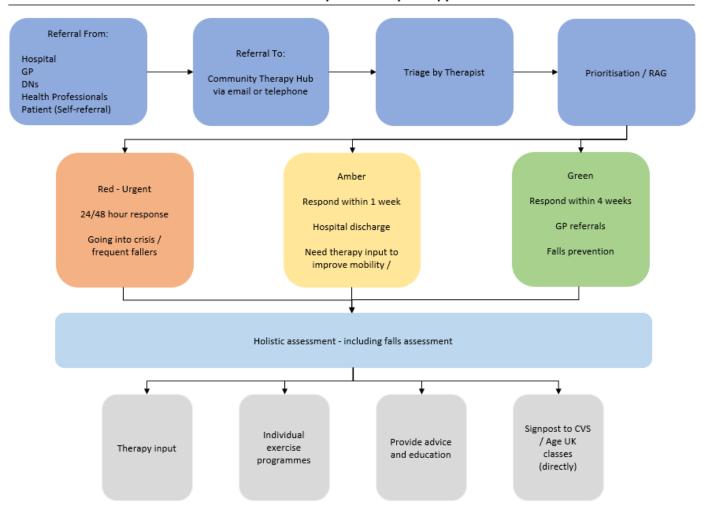
# **Appendix**

#### Falls Pathway: AAT



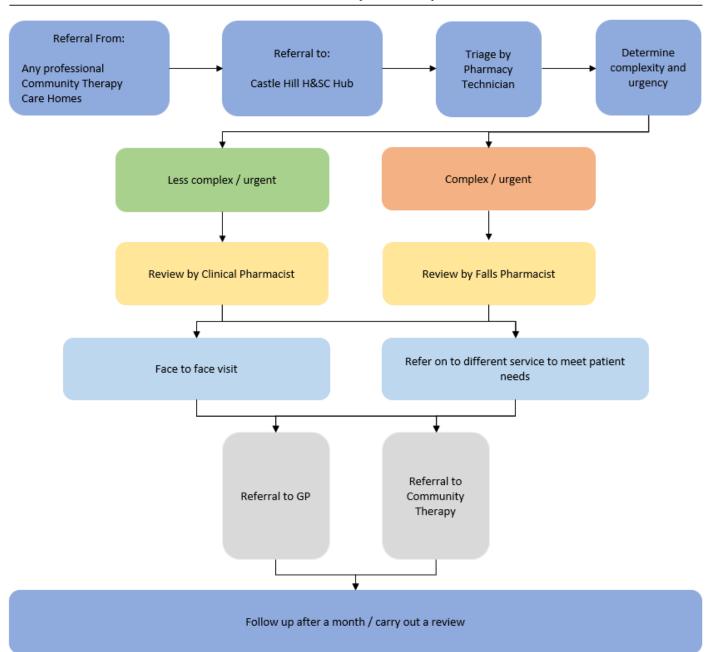


#### Falls Pathway: Community Therapy



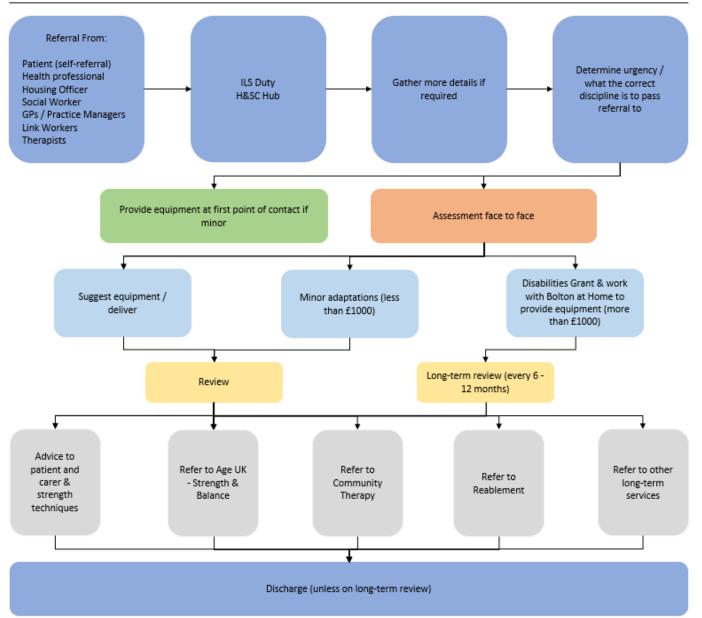


### Falls Pathway: Pharmacy





#### Falls Pathway: ILS





### Falls Pathway: Telecare

