

The Falls Challenge

VCSE Collaboration

Agenda

- 09.30 Welcome: Chris Head
- 09.35 The Challenge: Dr Charlie Kenward
- 09.50 Ageing Well: Sir Muir Gray
- 10.00 Greater Manchester Approach:
 Nicole McKeating-Jones & Beth Mitchell
 Q & A
- 10.45 Mini Movement & Hydration Break: Kirsty Brown
- 11.10 VCSE Action: Table Discussions
- 11.50 Plenary & Next Steps
- ▶ 12.30 Lunch

Welcome: Chris Head

Chris Head, Executive Director at West of England Rural Network (WERN) and VCSE representative BNSSG Integrated Care Partnership (ICP) Board

The Challenge: Dr Charlie Kenward

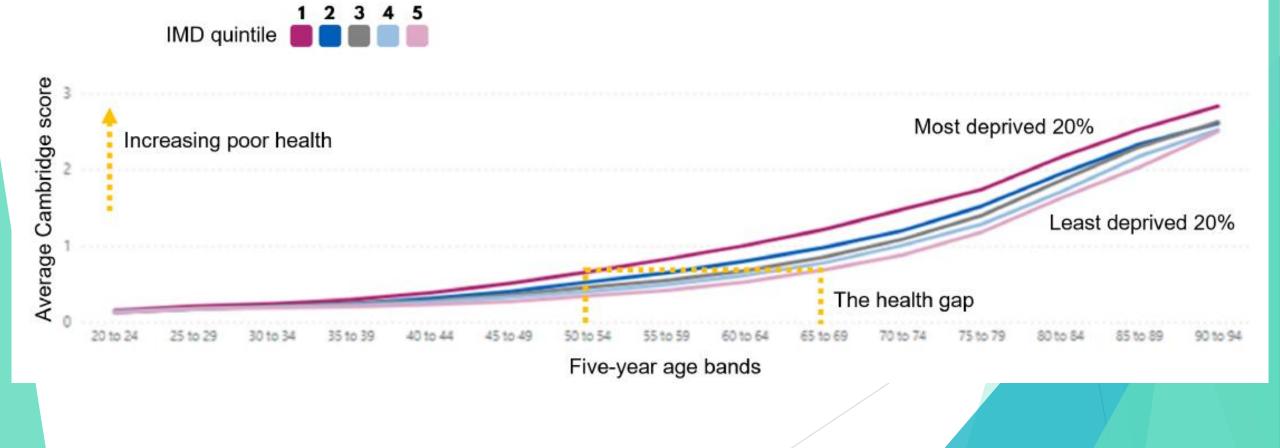
Clinical Lead for Research and Effectiveness at the Bristol, North Somerset and South Gloucestershire (BNSSG), ICS



Kelly Carmichael @kellycarmich... · 6h ··· This is my 89 year old Mom waiting in the #Ptbo hospital garage for 4 hours to be triaged. She has severe parkinson's disease, dementia and covid. She was being treated by her nursing staff in her residence but was brought in due to a fall....con't #OntariolsBroken

The population health mission

Drivers: poverty, discrimination, childhood trauma \rightarrow poor mental health, drugs, alcohol, smoking, po diet \rightarrow pain, diabetes, COPD, cance heart disease, dementia

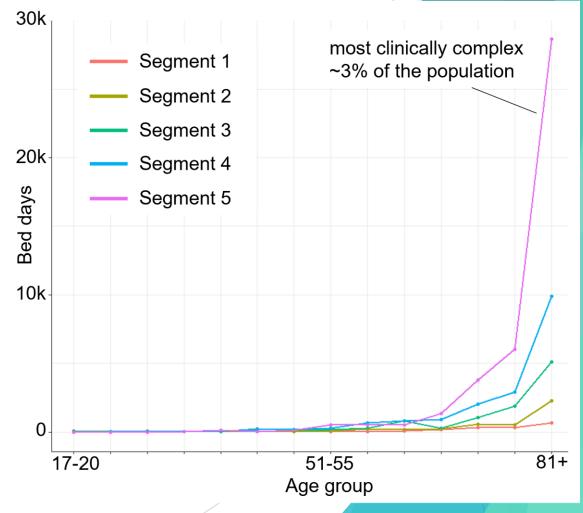


The population health problem

40% 75+ 30% 20% 25-49 0-24 10% 50-74 0% 2022 2026 2030 2035 2040

BNSSG population projections

Annual bed days due to falls by again and segment



Steve Nelson

CEO, West of England Sport Trust (Wesport)

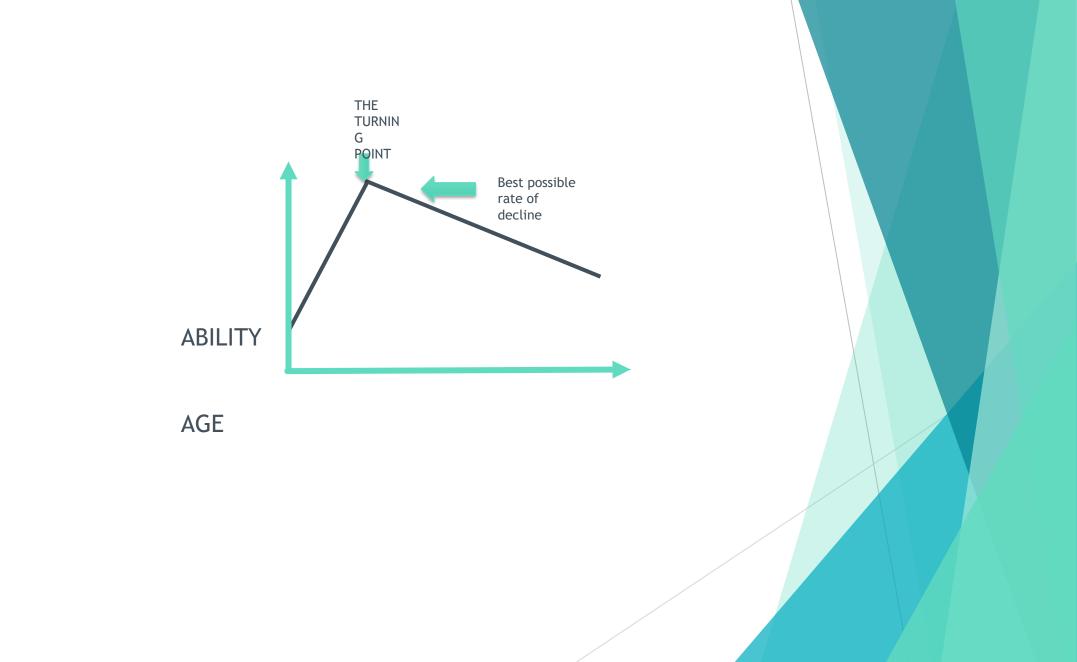
Ageing Well: Sir Muir Gray



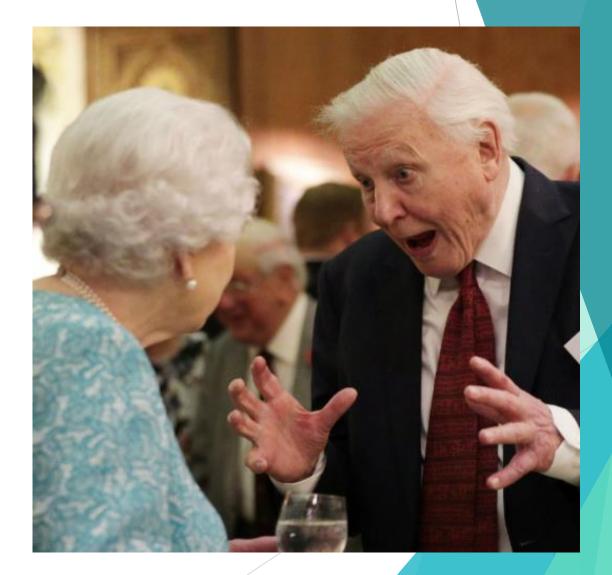
Professor for the Director of Optimal ageing at University of Oxford and former Chief Knowledge Officer for NHS

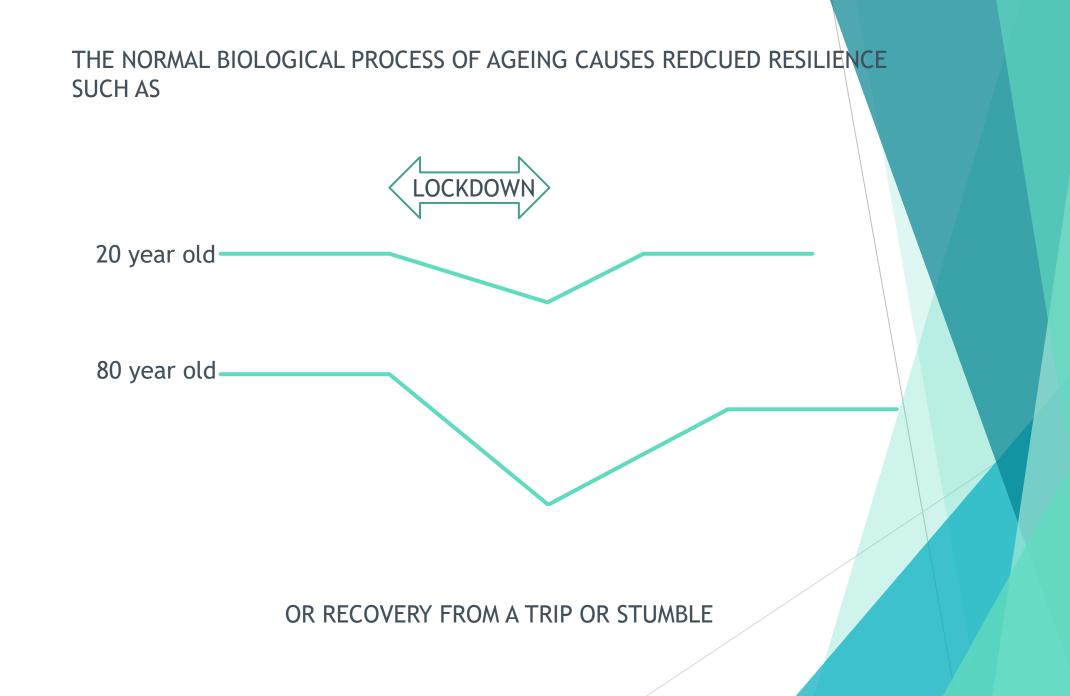
The birds and the bees 2.0





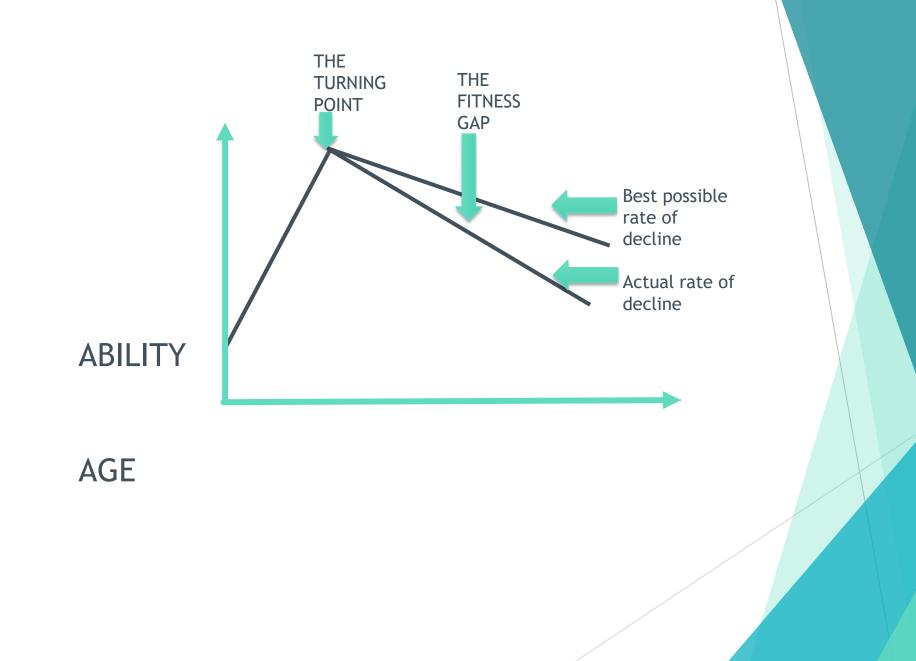
Ageing is not a cause of major problems till the 90s. But It does affect maximum ability and resilience

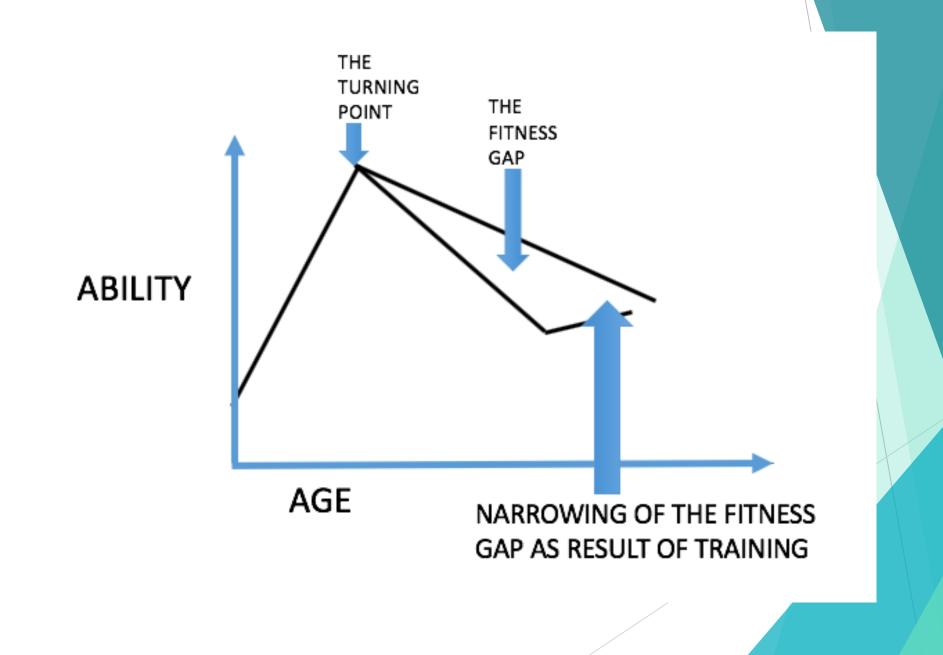




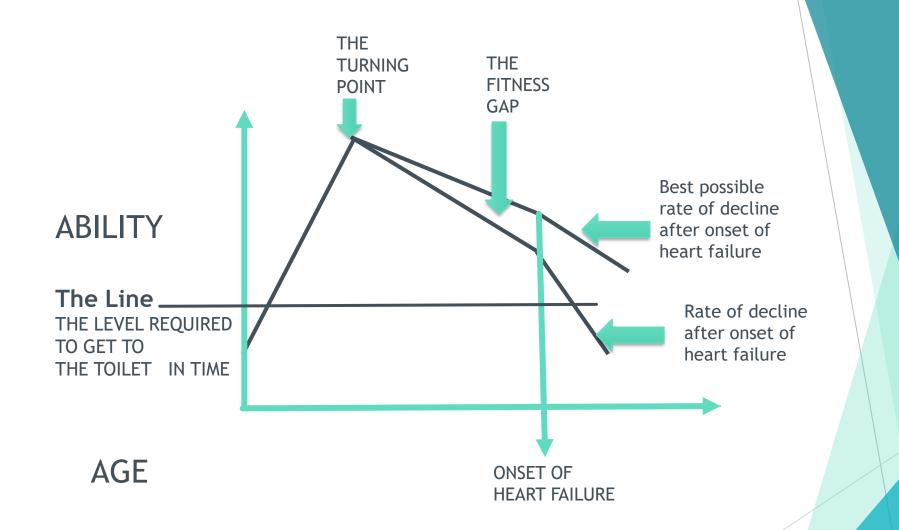


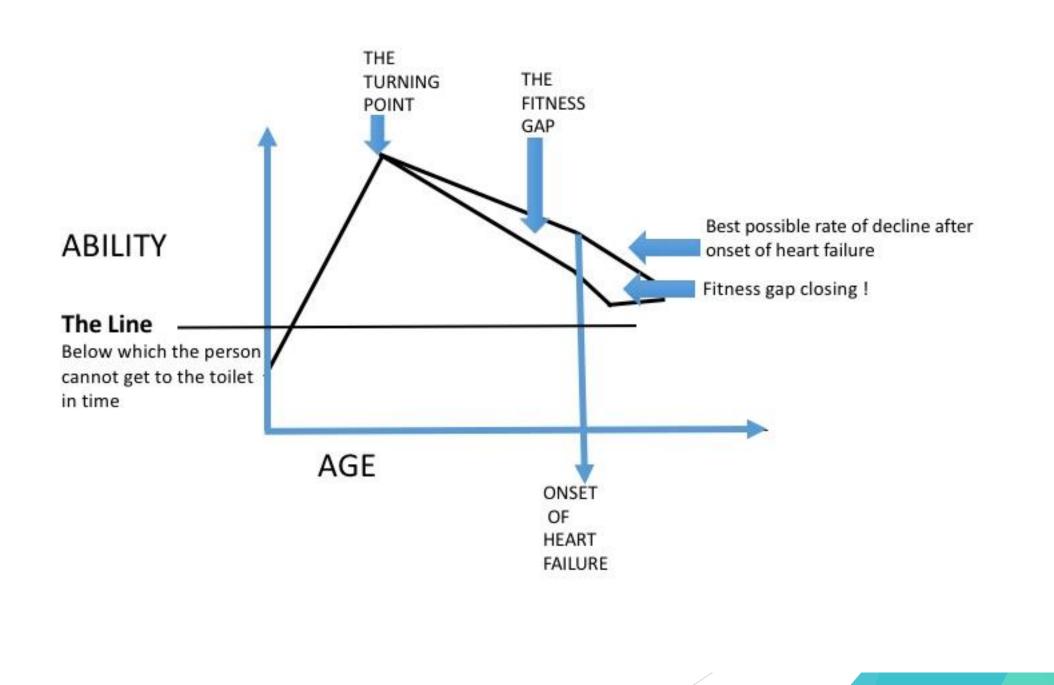
There are three other processes, the first of which is loss of fitness

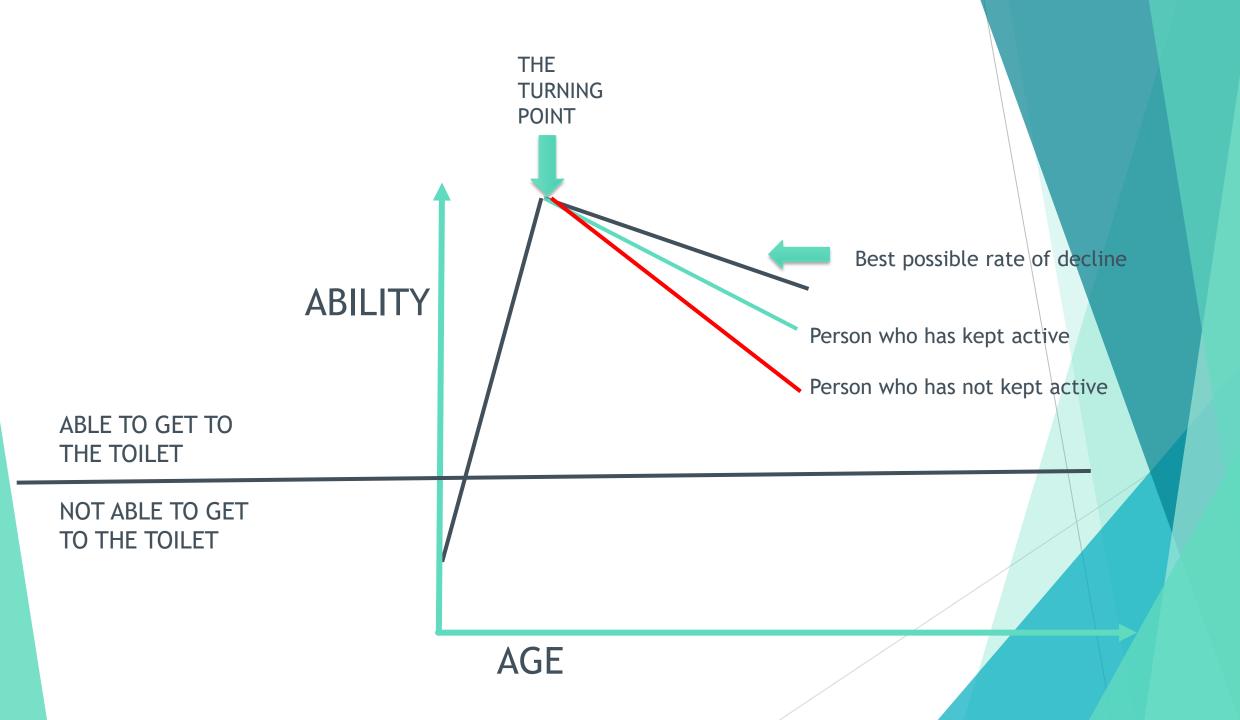


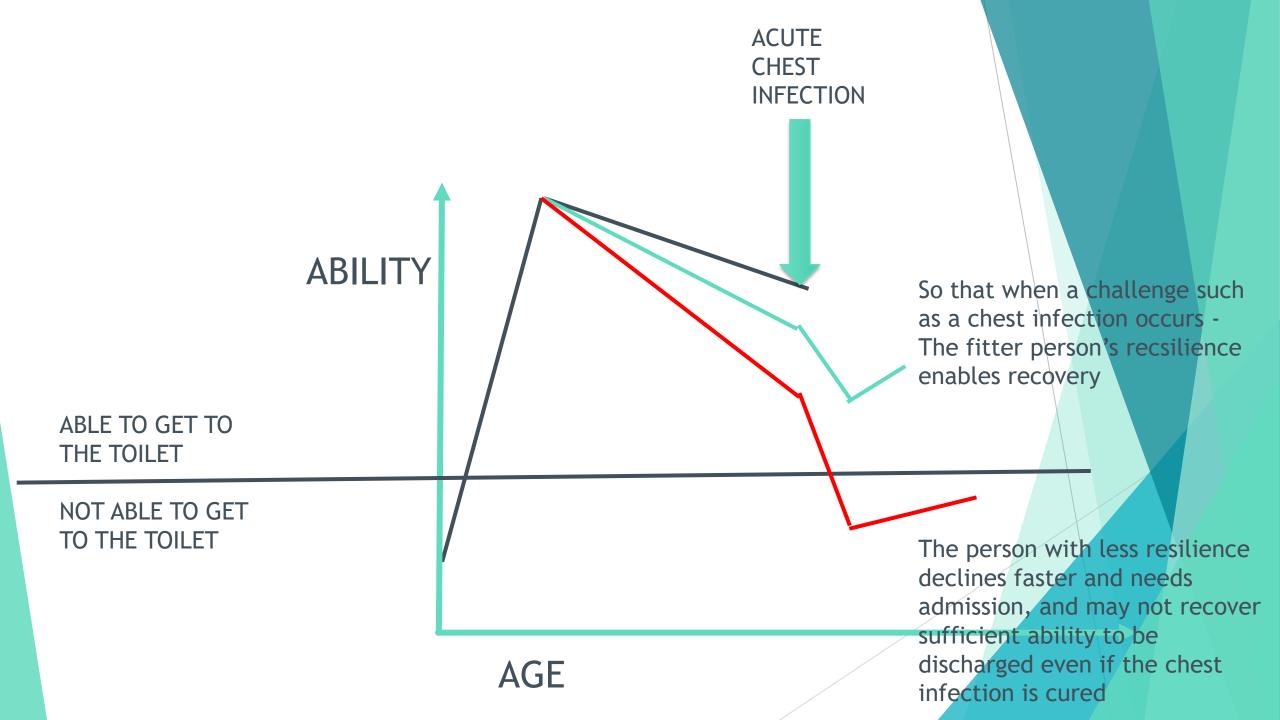


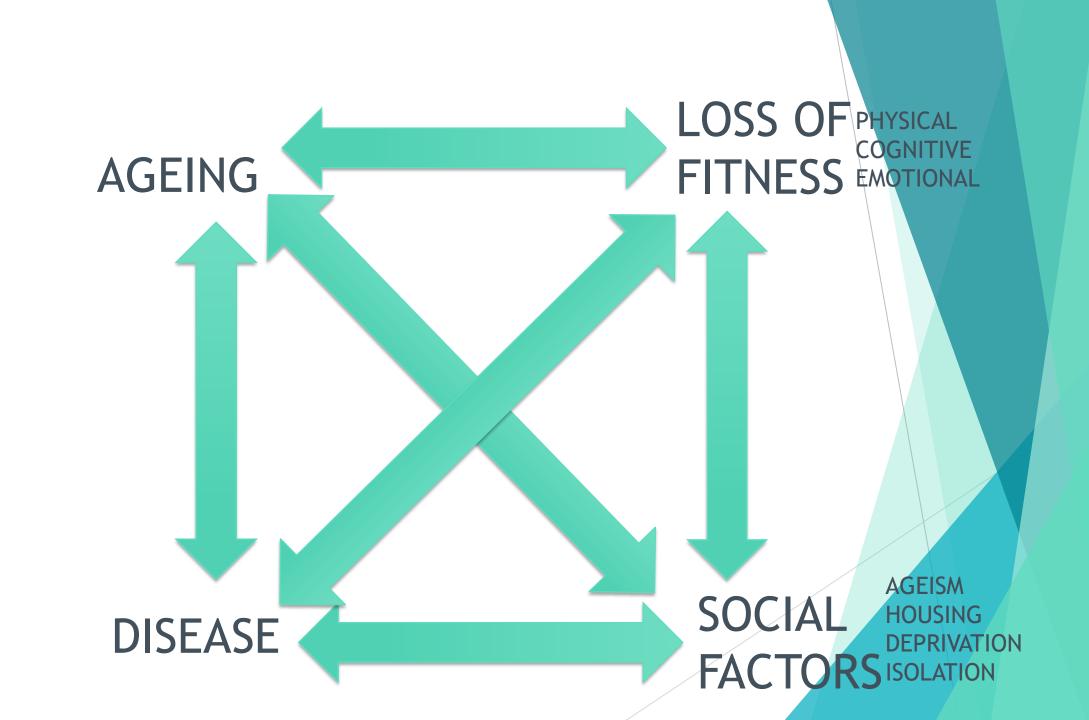




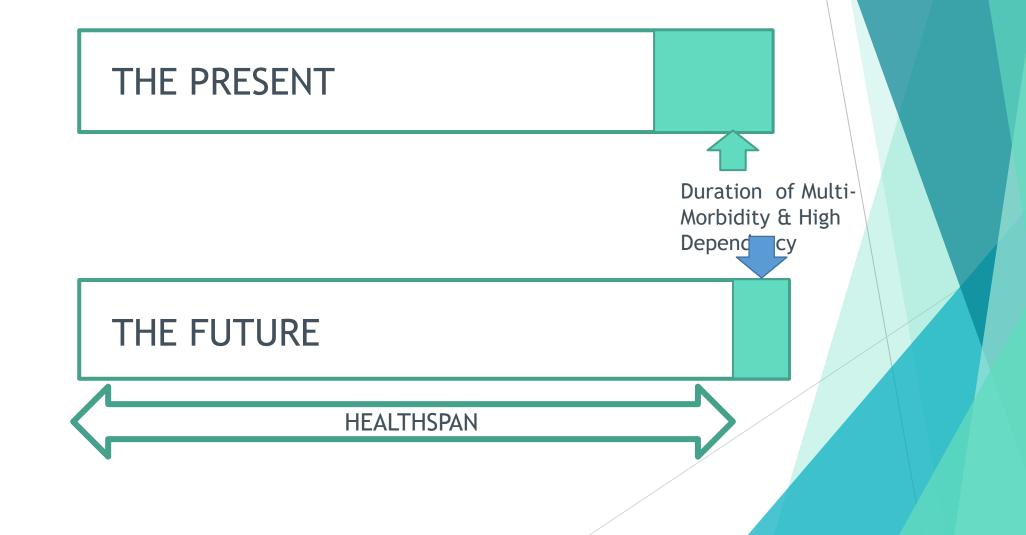




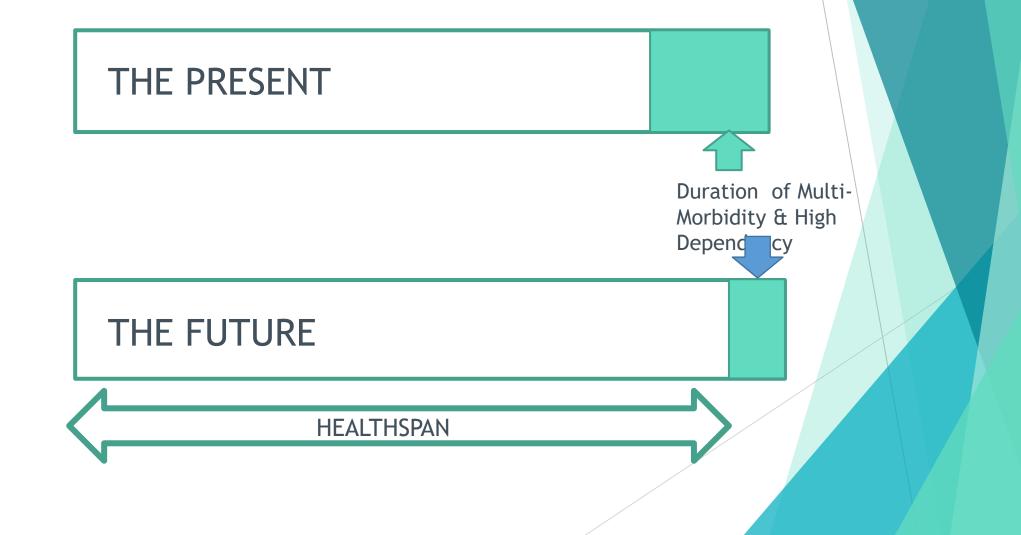


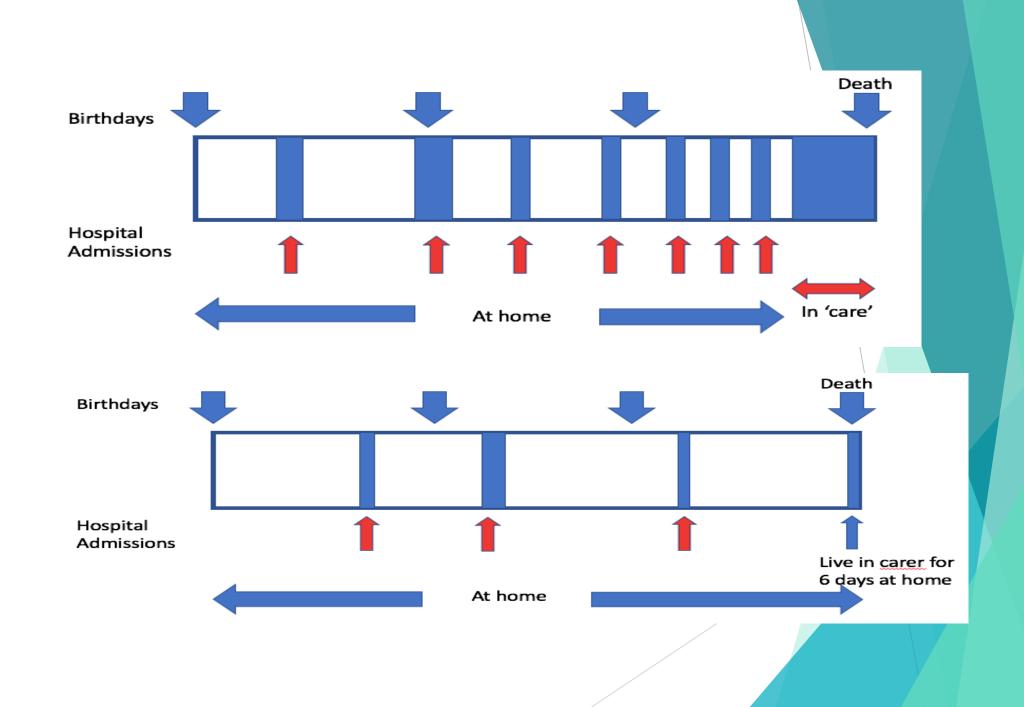


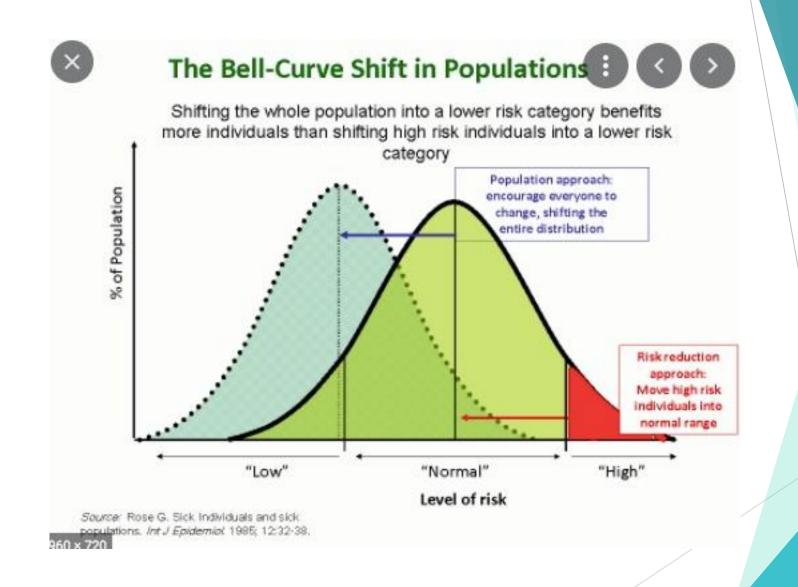
The first aim is to increase wellbeing and healthspan & compress the period of dependency.



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NEVER SAY "WE ARE REDUCING THE RISK OF FALLS" you undersell what you are doing

SAY "WE ARE REDUCING THE RISK OF FALLS, FRAILTY AND DEMENTIA"

AND WE WANT TO REACH EVERYONE AT RISK AND ENABLE THEM TO LEARN THAT HEALTHCARE IS WHAT YOU DO FOR YOURSELF

Learning how to fightback and live longer better

- ADAPTING TO AGEING, AND NOT WORRYING ABOUT IT
- FIGHTING BACK WHEN DISEASE STRIKES
- RECAPTURING LOST FITNESS AND ABILITY
- THINK POSITIVE AND INCREASE BRAINABILITY
- INCREASING STRENGTH AND POWER
- MAINTAINING AND IMPROVING SKILL & CO-ORDINATION
- INCREASING STAMINA
- INCREASING SUPPLENESS
- THINKING AND PLANNING AHEAD
- DYING WELL AS WELL AS LIVING WELL

Greater Manchester Approach: Nicole McKeating-Jones & Beth Mitchell

Nicole, Active Ageing Lead at Greater Sport

Beth, Ageing Well Programme Manager, Greater Manchester Ageing Hub

Greater Manchester: a collaborative approach to falls

Nicole McKeating-Jones

Active Ageing Lead - GreaterSport

Our mission:

To enable active lives for all



Context

Greater Manchester:

- Population of approx. 2.8M
- Made up of 10 boroughs
- Devolved power GMCA & GMH&SCP
- Ageing population
- High levels of health inequalities
 - with lower than national life expectancy/healthy life expectancy
- Varied but well established VCSE sector



Falls in GM - a brief history

- Falls part of the GM Population Health Plan since 2017
- GreaterSport collaborated with the University of Manchester's Healthy Ageing Research Group to explore strength and balance in GM
- Greater Manchester Falls Prevention: Delivering Integration and Reconditioning Report released January 2022



Greater Manchester Falls Prevention: Delivering integration and reconditioning

Six key recommendations:

- 1. Establish a strategic and operational Falls Collaborative
- 2. Increase provision of community evidence based S&B programmes
- 3. Adopt a system approach towards falls prevention
- 4. Ensure falls prevention in early years be a priority anticipatory care within GM
- 5. Embrace opportunity of GM ICS to deliver joint commissioning
- 6. Enable a proactive shift towards delivering positive ageinclusive narratives, delivering a population prevention agenda for all

Greater Manchester Falls Prevention: Delivering Integration and Reconditioning

The GM Falls Prevention Collaborative

GM Falls Collaborative:

Improving the health and wellbeing of GM residents in preventing falls, improving strength and balance and supporting reconditioning.

- Establishing clear governance and membership to broaden integration, reach and impact of specific and wider strategic programme priorities
- Championing implementation of evidence-based programmes
- Developing a Theory of Change for integrated action based on priority areas identified
- Ensuring and facilitating linkages and support within the GMHSCP/ICS to support the enablement of falls prevention programming and investment across the GM system
- Changing the narrative through a proactive shift towards positive age- inclusive language, practice and gain framing to reduce stigma and overcome ageism

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Equity, access and equality

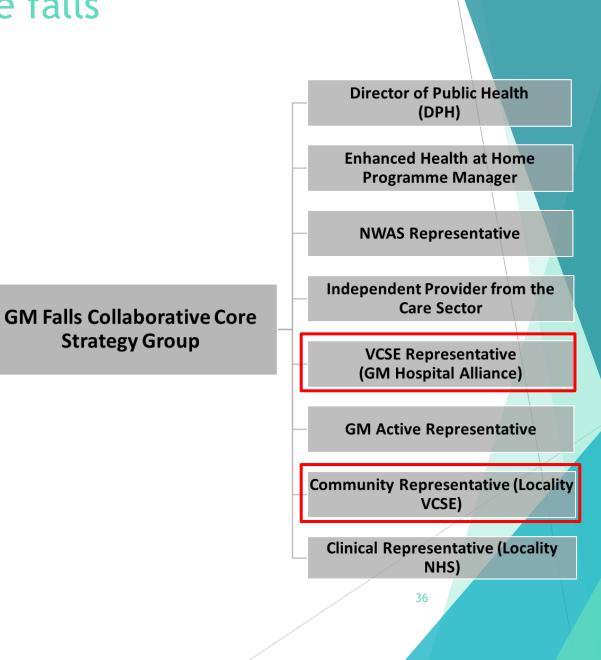
Embedding evidence and evaluating what works

Data improvement, insight and interrogation Workforce development, recruitment and training

Community of learning, sharing and problem solving Digital technologies that enhance and enable

the role of the VCSE in the falls collaborative

- **Adult Social Care Transformation**
- **Director of Adult Services (DASS)**
- **GM** Ageing Hub
- GreaterSport/GM Moving
- **ICS Leader**
- OHID
- **Tameside NHS**
- **University of Manchester**



Strategy Group

working with health system to invite VCSE sector in

- > VCSE accord with GMCA since 2017 & refreshed in 2021
- > Separate MoU with GM Health and Social Care Partnership
- > Well established person centred values in GM system
- Create spaces and networks for health sector and VCSE to work on shared priorities
- Advocating and showcasing the value of the work the VCSE do



Example 1: Age UK Bolton Care home Falls Pilot

- Delivered by Age UK Bolton's strength and balance team
- Overall objectives:
 - Reduce falls occurrences
 - Reduce falls related NWAS call outs
 - Reduce hospital admissions by increasing physical activity in care homes
- AGE UK Instructors certified in (PSI), Otago, GP referral and dementia awareness
- Instructors identify and work with staff to upskill in falls prevention and embed movement in daily care over 12 sessions
- Care homes selected using falls data from information analyst



Example 2: Home from hospital fund (10gm)

- 10GM joint venture of VCSE organisations across GM
- Home from Hospital Programme aims to enhance existing response to discharge pressures by collaboration between VCSE and hospitals
- Short term Home from Hospital Targeted Investment Fund launched for delivery between Dec 2022 - March 2023
- Invited applications from VCSE organisations operating homefrom-hospital services / hospital avoidance programme
- 13 applications, 9 successful
- AgeUK, Caribbean African Health Network, LGBT Foundation, MIND, Wai Yin Society funded



GREATERSPORT

Greater Manchester Moving > A < V

Urgent Community response Falls Lifting service Pilot (8 weeks) Starting January 2023

Partnership with the Greater Manchester NHS and the North West Ambulance service:

- It's for Level 1 Falls (not injurious)
- Aim is to prevent long lies on the floor
- The service then refers onto the local falls prevention service for a further assessment and intervention

