

Better Care Fund resources

Implementing and evaluating the Leicester, Leicestershire and Rutland Falls Pathway

Scheme

Who?

Leicestershire



What

Leicester, Leicestershire and Rutland (LLR) falls pathway.



Why?

The scheme was set up with the aim of:



- reducing the number of falls in older people
- preventing hospital admissions by providing fast treatment for people who have fallen.

Intended benefits of the programme:


- reduced on-scene time for East Midlands Ambulance Service (EMAS) resulting in fewer breaches into high-level call service and more efficient use of EMAS resources
- reduced number of outpatient falls clinics, dedicated falls clinics no longer needed (by end of year two)
- savings on consultant costs vs therapy triage service
- savings to adult social care (e.g. reduced burden on reablement packages)
- service user qualitative improvements (improved confidence, mobility, ease of access/use of LLR falls service pathway).

When?

Falls, triage and assessment started in January 2017. 'Steady Steps' started in the county in September 2017 and in Leicester City in October 2018.



How?

Assessment and treatment pathways ensure improved outcomes and quality of life, enable people to retain their independence and give them parity of access to services across LLR. Residents have access to strength and balance facilities to reduce the risk of falls-related injuries. 


Prevention and monitoring pathway

1. Prevention through early identification and reduction of risk factors.
2. Assessment of clinical and physical factors such as gait, turning, balance and medication.
3. Management through appropriate referrals to local services.
4. Monitoring of patients to identify preventative interventions rather than just responsive alerts to falls.
5. Support through self-care recommendations, education and advice.

Falls/triage and assessment:

- waiting time to see a clinician and commence therapeutic interventions reduced
- holistic therapy review and interventions to strengthen self-help, including home assessment to identify hazards, etc.
- therapy intervention provided while waiting to be seen by the consultant falls clinic should the onward referral still be required.

Challenges

- Fast turnover of senior staff in clinical commissioning groups (CCGs) means that LLR is constantly having to explain how the programme works and when it will happen. 
- Data sharing between organisations involved in the programme.
- Measuring impact on a quarterly basis, particularly as the five elements of the scheme have been implemented in sequence, not all at the same time.

Impact

The scheme has resulted in efficiency savings and improved outcomes for people using services.



- Falls related non-elective admissions have stabilised.
- Therapy triage – 502 patients have avoided the need to go into a clinic. This has resulted in £133k being saved on consultant appointments. Waiting times reduced from 25+ weeks to 13 weeks.
- Steady Steps – 48 courses (300 participants) and 30 instructors trained; £2.32 saved in the health and care system for every £1 spent. Results in reduced social isolation and social peer support for patients.
- Care homes falls management – £42k system savings by reducing conveyance and emergency department (ED) and outpatient admissions, improvements in managing injurious falls, staff confident in managing falls and improved safety standards in care homes.

Case study

Mrs T is 74, has had a hip replacement, is a cancer survivor and lives with vertigo. She joined her local falls management and exercise programme in June 2016. To start with, she took part in a one-hour weekly strength and balance class for people over 65 who



are concerned about balance and mobility and/or may feel unsteady on their feet. The classes run for 24 weeks and are delivered by a qualified postural stability instructor. After completing the classes, Mrs T joined a maintenance group which enables participants to continue to improve their strength and balance.

Mrs T regularly attends the group and often speaks about how much she enjoys the session and how much stronger and fitter she feels. The people in the group have now progressed to being able to complete a 20-minute light aerobic session, 10 minutes of balance exercises and 15 minutes of strength work using balls and therabands. Mrs T says she is now much faster at moving around and suffers far less with breathlessness.

Practice example: Implementing and e...





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link 1 | <https://www.scie.org.uk/integrated-care/better-care/practice-examples>