

Case study which demonstrate how the WBFGA has been used to deliver long term positive health and social care impacts and outcomes

What is the case study about?

Locally, an audit identified that the highest number of ambulance conveyances from care homes were related to falls. Patients who fell in care homes were being left on the floor for long periods waiting for the ambulance crews to arrive to assess them.

We wanted to prevent the potential for harm that often result when patients are left on the floor for long periods of time and to prevent the distress that often accompanies avoidable conveyances and long accident and emergency waits for non-injury falls. To do this we established a steering group and engaged with nursing and residential homes, NHS and Local Authorities. We developed a model protocol that all homes could use, and this was agreed by all partners. It was the first time we had ever had a model falls protocol for use in the independent sector.

The pilot highlights the benefits for the residents in care homes, the public sector and services. Care is provided closer to home in the right place at the right time by the right person. This has led to better outcomes for the patients with reductions in avoidable hospital admissions

How has applying the principles of the WBFGA been helpful?

Falls/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 and 50% of people older than 80 falling at least once a year.

Working collaboratively with nursing and residential homes and supporting training and development of a model protocol has had a significant benefit to both patients, care home staff and the avoidance of inappropriate 999 calls and unnecessary hospital conveyances/admissions.

Work in collaboration with care homes, other health providers, social services, paramedics and falls leads to agree the aims and objectives of the project. Led to the success of the project.

What have you found to be most challenging?

There needs to be recognition that older people living in care homes are at high risk of falls and should have the same access to falls management strategies/services as an older person living in their own home.

What lessons/learnings would you share?

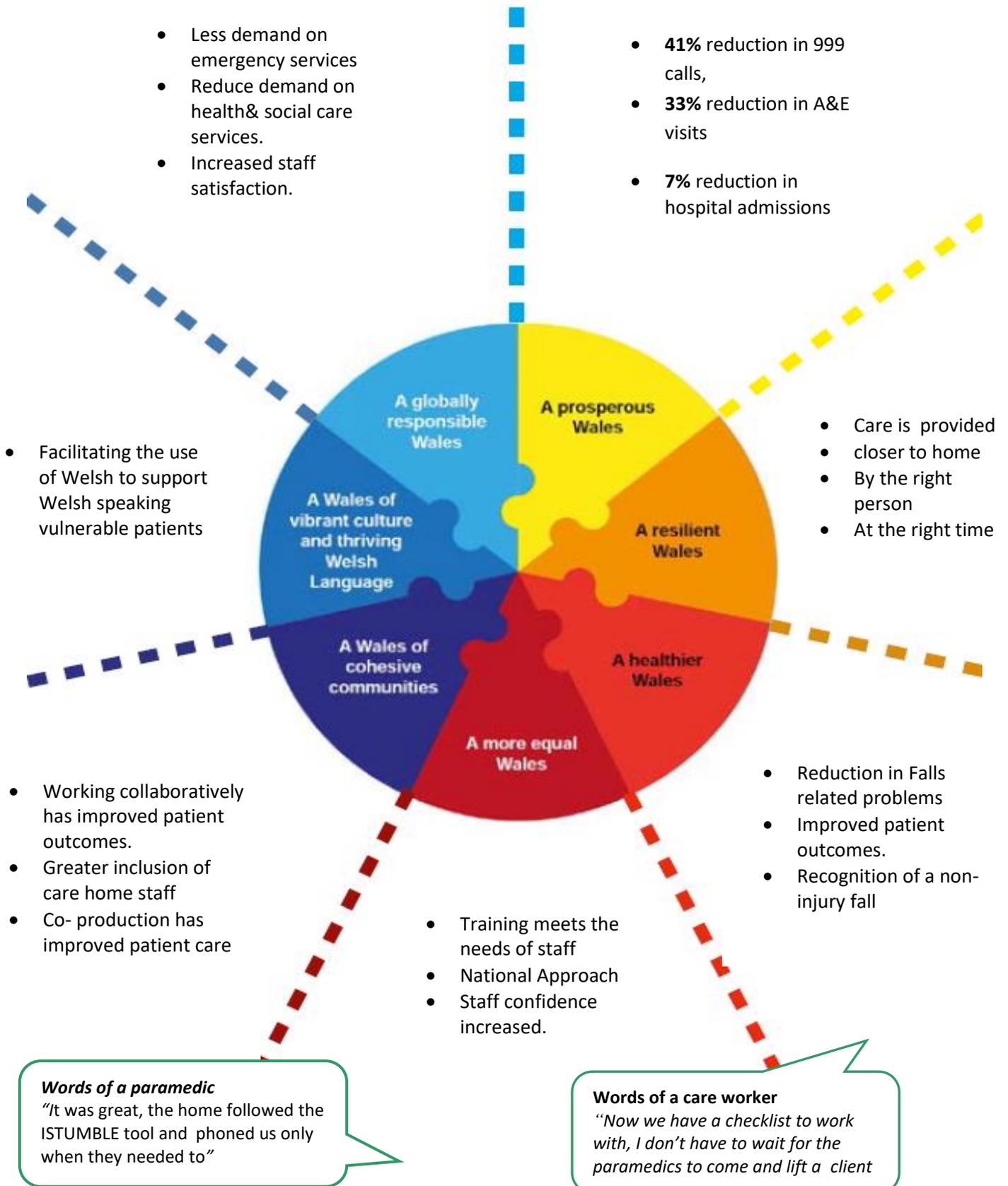
Care Home staff did not have a robust assessment tool or protocol in place that would enable them to identify if this was a non-injury fall and they were unable to lift the patient safely off the floor. This resulted in 999 calls being their only 'governance' process.

Prepared by:

Angela Powell - Clinical Lead for QPS - Primary Care & Community Division

Aneurin Bevan University Health Board

How action on 'Get Me Up' Supporting Care Homes to Identify & Manage Non -Injurious Falls will positively impact all seven Well-being Goals



How applying the Sustainability Principle and the 5 Ways of Working is helping to deliver positive impacts and outcomes in “Get Me Up” Supporting Care Homes to Identify & Manage Non –Injurious Falls

Way of working	What positive impacts/outcomes can be achieved by this way of working	How will we achieve these positive impacts/outcomes
Balancing short and long term - needs	The pilot data has shown a 41% reduction in 999 calls, An overall reduction of 27% in ambulance conveyances, 33% reduction in A&E visits, 7% reduction in hospital admissions and a 21% reduction in treatment by paramedics on site	By supporting staff to manage residents in care homes who have had a non-injury fall.
Integration	Supports key messages in the Older People’s Commissioner for Wales national programme, Ageing Well in Wales; the Well Being of Future Generations Act (Wales) 2015; Social Services and Well Being Act (Wales) 2014; Bevan Commission Simply Prudent Health (2013) and corporate social responsibility.	Working collaboratively has resulted in improved patient outcomes. Care Homes staff confidence in recognising and managing a resident with a non-injury fall.
Prevention	Better use of resources for both Health Board emergency services and Care Homes Patients are not now lying on the floor for long periods of time. Improved immediate and longer term patient outcomes There was a 10% reduction in the number of falls recorded by Care Homes.	There has been a reduction in the number of long lies and the associated complications with long lies. Avoidable admissions have been reduced A&E visits have been reduced. Improved immediate and longer term patient outcomes
Collaboration	A multi-agency group, led by Aneurin Bevan University Health Board in co-production with care homes Local authorities Welsh Ambulance Service Trust , ensures a collaborative approach,	Concept of which is being shared nationally and with 1000 lives. Training materials now part of the national training programme.
Involvement	Working collaboratively with nursing and residential homes and supporting training and development of a model protocol has had a significant benefit to both patients, care home staff and the avoidance of inappropriate 999 calls and unnecessary hospital conveyances/admissions.	Care Home staff, both registered and unregistered, have increased confidence in managing non-injury falls