| CABINET | AGENDA ITEM No. 7 | |
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| 12 FEBRUARY 2024 | PUBLIC REPORT | |

| Report of: | | Jyoti Atri, Director of Public Health, Public Health | n Directorate | |
|---------------------|--|--|---------------|--|
| Cabinet Member(s) | inet Member(s) responsible: Councillor Saqib Farooq, Adults and Health | | | |
| Contact Officer(s): | Emily Smith Directorate | Tel. n/a | | |
| | Helen Tunster, Senior Partnership Manager, Public Health Directorate | | | |

CAMBRIDGESHIRE AND PETERBOROUGH FALLS PREVENTION STRATEGY

| RECOMMENDATIONS | | | | |
|------------------|--------------------|--|--|--|
| FROM: Jyoti Atri | Deadline date: n/a | | | |
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It is recommended that Cabinet:

Endorse Peterborough City Council's role within the system-wide Cambridgeshire and Peterborough Falls Prevention Strategy.

1. ORIGIN OF REPORT

1.1 This report is submitted to Cabinet following a referral from CLT on 5 December 2023.

2. PURPOSE AND REASON FOR REPORT

- 2.1 The purpose of this report is to provide an overview of the new Cambridgeshire and Peterborough Falls Prevention Strategy (2023-2026) and the role of Peterborough City Council in supporting the provision of clear strategic direction to prevent falls and falls-related injuries across the Cambridgeshire and Peterborough Integrated Care System.
- 2.2 This report is for Cabinet to consider under its Terms of Reference 3.2.8 and 3.2.9

To determine policies or strategies that will have a significant impact on two or more wards, and to promote the Council's corporate and key strategies and Peterborough's Community Strategy and approve strategies and cross-cutting programmes not included within the Council's major policy and budget framework.

3. TIMESCALES

| Is this a Major Policy | NO | If yes, | N/A |
|------------------------|----|----------|-----|
| Item/Statutory Plan? | | date for | |
| , | | Cabinet | |
| | | meeting | |

4. BACKGROUND AND KEY ISSUES

- 4.1.1 Falls and related injuries are a common and significant problem for older adults and a major public health issue. Falls are a major cause of disability and injury related death in people aged 75+ and have a large impact on quality of life¹. Around one in three people over 65 years old and half of those over 80 experience a fall at least once a year². In Cambridgeshire and Peterborough in 2022/23, there were 2,699 emergency admissions due to falls and 1,015 admissions due to a hip fracture. The estimated combined total cost of these hospital admissions was £16.3M, an increase of over £1.9M on the previous year³. These costs do not include wider health and social care costs such as primary care, ambulance or adult social care costs³. The prevalence of falls and fractures is expected to rise along with a rise in associated burdens on the wider health and social care services due to the ageing population in Cambridgeshire and Peterborough³.
 - 4.1.2 Falls and frailty are increasingly being identified as a priority by the Integrated Care System on a system, place and neighbourhood level. The Integrated Care Board has assigned a Falls and Frailty Lead and developed a Falls and Frailty workstream. Furthermore, the North and South Place Partnerships, as well as many of the Integrated Neighbourhoods in Peterborough, have a priority around falls and/or frailty.
 - 4.1.3 The new three-year Falls Prevention Strategy and detailed delivery plan have been developed collaboratively by the multi-agency Cambridgeshire and Peterborough Falls Prevention Strategy Group, which is a partnership group with representation from a range of ICS partners, including Peterborough City Council (PCC). This strategy group works closely with the Peterborough Falls Prevention Working Group. The strategy builds upon a one-year Falls Prevention Strategy (2022/23) developed as an interim strategy to support recovery of services following Covid. The strategy includes a number of interventions that have been shown to be cost and clinically effective at preventing some falls and fractures, resulting in improved health outcomes and independence for older people.
 - 4.1.4 The intended outcome of the strategy is a reduction in the rate of hip fracture admissions, and as a result, there may be reduced costs to health and social care (not cash releasing). A recent return on investment tool has demonstrated that certain interventions, such as strength and balance programmes and home hazard assessment and improvement programmes, demonstrate a financial and societal return on investment. On an individual level, the strategy intends to improve quality of life and healthy life expectancy.
 - 4.1.5 The strategy has no financial implications for the council at this present time.

4.2 Main Issues

4.2.1 The system wide strategy outlines the plans of organisations across Cambridgeshire and Peterborough to reduce falls and falls-related injuries by taking a system wide approach to falls prevention and bone health (Appendix 1). It details six priorities to achieve the vision of "working together to reduce the rate of falls and reduce hip fracture admissions amongst older adults, by preventing first falls and reducing the risk of subsequent falls to enable older people in Cambridgeshire and Peterborough to enjoy an active, fulfilling life".

For each of the priorities there is a detailed action plan outlining existing and planned interventions to enable the implementation of the strategy (Note, only PCC actions are highlighted in the action plan within the accompanying strategy). The priorities are:

- Prevention and early identification of people at risk of falls

¹ NICE. Falls: Assessment and prevention of falls in older people. NICE Clinical Guidance 161, 2013, 1 (nice.org.uk)

² Todd C, Skelton D. What are the main risk factors for falls amongst older people and what are the most effective interventions to prevent these falls? *World Health*. 2004;(March):28. [Accessed 17 May 2022]: Copenhagen, WHO Regional Office for Europe (Health Evidence Network report; http://www.euro.who.int/document/E82552.pdf,

³ Cambridgeshire and Peterborough Falls Prevention Strategy 2023-2026. Available at: Appendix 1.

- Evidence-based and good practice falls prevention interventions and services
- Action to address risk in hospital
- Action to address risk in care homes
- Detection and management of fragility fracture
- Inclusive services

The actions for Peterborough City Council (PCC) against these priorities are summarised below.

4.2.2 Priority 1: Prevention and early identification of people at risk of fall

The aim of this priority is to intervene at the earliest opportunity to prevent and reduce the number of people who have a first fall. A focus for action by PCC is on ensuring the public and front line staff engaging with older adults have the information they need to make informed choices about falls risk factors and have access to opportunities to live and age well. This includes further use and development of the 'Stay Stronger for Longer' campaign messaging as well as promoting and evaluating the use of the recently launched interactive 'Steady on Your Feet' online tool. The tool is designed to support older adults who have not fallen to identify and take action to reduce their own personal risk factors for falling using the information, advice and service signposting provided in their individualised action plan.

Physical activity is another major area for action under this priority. There is a focus on supporting active, independent mid-older aged adults living in the community to be physically active as part of upstream primary prevention. This includes improving awareness, accessibility and uptake of opportunities, supported by workforce development, as well as the commissioning of physical activities for this cohort. PCC Public Health are working in partnership with Vivacity to strengthen the offer of strength and balance activities in line with the falls prevention exercise pathway. The PCC-led Frailty Prevention Programme, funded by the ICB, will be instrumental in encouraging older adults to be active through embedding physical activity behaviour change conversations and signposting into local programmes such as the Good Neighbours Scheme and Cost of Living hubs. The strategy strongly recognises the importance of scaling up physical activity in preventing falls and reducing the risk of falls, and this is weaved throughout the different priorities targeting different ability levels and settings, influenced by PCC (see priority summaries below).

This priority also acknowledges the potential role of the outdoor environment in supporting midolder age adults to be active and this will be considered in the development of the Healthy Places Joint Strategic Needs Assessment by PCC/CCC Public Health Team over the coming year.

4.2.2 Priority 2: Evidence-based and good practice falls prevention interventions and services

The aim is to ensure that people who have fallen have timely access to services, interventions and opportunities that will support a reduction in the risk of falls and falls-related injuries. The focus is on system partners working together to improve the join up of services to facilitate this, underpinned by robust risk stratification, good cross system communication, strengthening the uptake/delivery of specific interventions and workforce development. PCC Public Health Team will support this by providing specialist public health advice and support to ensure falls prevention guidance is adopted, and through monitoring the delivery of the Falls Prevention Action Plan. The team will also strengthen links with the ICS Integrated Neighbourhoods to support falls prevention in a personalised and place-based manner. PCC Adult Social Care services will support the development of the integrated system-wide falls prevention pathway, ensuring that their services are considered and built in. ASC will also ensure that conversations about falls prevention are included in the role of the new PCC Housing Needs roles at the hospital.

Again, physical activity is a key focus of this priority. Ensuring that all older adults have the opportunity to be more active and have access to strength and balance exercise proven to reduce the rate and risk of falls is a key focus. In the last year, PCC Reablement Team have

successfully built in 'movement'/physical activity goals into the support plans of all service users accessing Reablement, and service users have reported positive outcomes. In the coming strategy, PCC ASC plan to further embed movement and physical activity into other delivery areas. ASC will also pilot the inclusion of 'movement' goals into the care package of any new client assessed as needing care.

4.2.4 Priority 3: Action to address risk in hospital

The aim is to minimise the risk of inpatient falls, repeat falls and re-admissions, and improve quality of life. All the actions under this priority are led by North West Anglia Foundation Trust (NWAFT) and Cambridge University Health Foundation Trust (CUHFT), with the support of PCC as relevant. For example:

- PCC Public Health Team and Adult Social Care Early Intervention and Prevention teams will continue to influence and support the development of communication systems that allow the sharing of multi-factorial falls risk assessment outcomes with PCC and other community providers to support the join-up of services and improve client outcomes.
- They will also raise awareness and promote the uptake of relevant Adult Social Care Early Intervention and Prevention services on discharge such as Reablement, TEC and Sensory services.

4.2.5 Priority 4: Action to address risk in care homes

The aim of this priority is to prevent, reduce and manage falls in nursing and residential home residents in order to reduce the risk and consequences of fragility fracture and a long-lie, improve quality of life and reduce system wide pressures. PCC will support this priority by working with care and residential homes and CPFT to embed movement and physical activity into the daily lives of residents.

4.2.6 Priority 5: Detection and management of fragility fractures

The aim is to ensure early identification and management of osteoporosis risk factors to prevent a first or subsequent fragility fracture and provide optimal support after a fragility fracture. PCC Public Health have taken a key role to understand local needs and develop a bone health strategy to outline necessary local action. PCC will support the development of a business case to support the commissioning and delivery of a Fracture Liaison Service (FLS) in North West Anglia Foundation Trust (NWAFT). This is intended to enable the system to take action to reduce inequalities in health outcomes around bone health.

4.2.7 Priority 6: Inclusive services

The aim is to ensure early falls prevention services are inclusive and accessible to all service users in line with the Equality Act and Public Sector Equality Duty to enable all older adults to receive falls prevention interventions that meets their needs. PCC will support this by using the work underpinning the Equality Impact Assessment of the strategy to develop and provide guidance to falls prevention services to support them to review the needs of their older clients and consider improvements if needed. Similarly, PCC will involve older adults in the coproduction of falls prevention related services, campaigns and projects led by them to deliver on the strategy and will influence partners and actions in the strategy to do the same.

- 4.2.8 An engagement exercise for the strategy has been completed. The strategy has been presented to a variety of Boards with the feedback incorporated into the strategy. Feedback from older adults has been obtained via a survey to CPFT service users which has indicated that the strategy should consider engagement with GPs/Primary Care to better understand how they can support the falls pathway. Further engagement is planned with the Older People's Partnership Board to build on feedback received from the Board for the one-year strategy.
- 4.2.9 The strategy will be monitored by the Cambridgeshire and Peterborough Falls Prevention Strategy Group bi-monthly. It will report to the Joint Commissioning and Executive Group (JCPEG)(or other appropriate Board as advised) and Health and Wellbeing Board, as requested.

5. CORPORATE PRIORITIES

- 5.1 The recommendation contributes to the Council's Corporate Priorities as follows:
 - 1. Our Places & Communities
 - Places and Safety
 - Health and Wellbeing
 - 2. Prevention, Independence & Resilience
 - Adults

The project will have a neutral impact on carbon emissions. There will be a neutral impact on the council's carbon emissions and environmental impact and the city's carbon emissions and environmental impact.

6. CONSULTATION

- 6.1 Engagement has been undertaken with:
 - PCC Adults Management Team 4 October 2023
 - PCC/CCC Public Health DMT 24 October 2023
 - PCC CLT 5 December 2023
 - Older People's Partnership Board 11 December 2023
 - Cambridgeshire and Peterborough ICB Joint Clinical and Professional Executive Group (JCPEG) – 13 December 2023
- 6.2 Future engagement:
 - North Partnership Board (ICS)
- 6.3 The recommendation has been considered by:
 - Corporate Leadership Team (CLT)

7. ANTICIPATED OUTCOMES OR IMPACT

7.1 The endorsement of the role of Peterborough City Council in the Cambridgeshire and Peterborough Falls Prevention Strategy by Cabinet will contribute to a reduction in falls and hip fractures, resulting in reduced costs to health and social care and improved health outcomes and independence for older people.

8. REASON FOR THE RECOMMENDATION

8.1 The recommendation will enable Peterborough City council to support the provision of clear strategic direction across the Integrated Care System to prevent falls and falls-related injuries.

9. ALTERNATIVE OPTIONS CONSIDERED

9.1 Option 1: Do nothing/do not develop a strategy – This will be detrimental to the join-up of systemwide partners to develop an effective multi-factorial response to falls and fragility fractures.

10. IMPLICATIONS

- 10.1 The strategy has no financial implications. Any additional resource requirements identified through delivery of the strategy will be taken through the relevant commissioning processes as they arise.
- 10.2 There are no legal implications related to this item. Legal advice will be accessed if needed for any commissioning as required.
- 10.3 The Equalities Impact Assessment did not identify any implications.

11. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

A full list of resources used in the Strategy are in the full Cambridgeshire and Peterborough Falls Prevention Strategy 2023-2026 document (Appendix 1).

Falls Prevention Strategy Detailed Action Plan. New Shire Hall: Public Health Team.

NICE. Falls: Assessment and prevention of falls in older people. *NICE Clinical Guidance 161*. 2013. Available at: 1 (nice.org.uk)

Todd C, Skelton D. What are the main risk factors for falls amongst older people and what are the most effective interventions to prevent these falls? *World Health*. 2004;(March):28. [Accessed 17 May 2022]: Copenhagen, WHO Regional Office for Europe (Health Evidence Network report; http://www.euro.who.int/document/E82552.pdf,

Cambridgeshire and Peterborough Integrated Care System. 2022. Joint Health and Wellbeing Integrated Care Strategy. Available from: <u>Cambridgeshire & Peterborough Insight – Health and Wellbeing – Public Health – Health and Wellbeing Integrated Care Strategy (cambridgeshireinsight.org.uk)</u>

12. APPENDICES

12.1 Cambridgeshire and Peterborough Falls Prevention Strategy 2023-2026 document (Appendix 1).