

LAA Briefing Event 28th February 2007

Healthier Communities and Older People

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- Antoinette Broad – Oxfordshire PCT
- Jerry Auton – Oxfordshire County Council
- Carl Petrkofsky – Department of Health
- Carolyn Durrant – West Oxfordshire District Council
- Faith Charnock-Wilson – Government of the South East
- Helen Bishop – Vale of Whitehorse District Council
- Jackie Wilderspin – Oxfordshire PCT
- Janet Banfield – Oxfordshire County Council
- Ja Lally – South Oxfordshire District Council
- Val Johnson – Oxfordshire County Council
- Mary Daniel – Age Concern
- Susan Roberts – Oxfordshire County Council
- Lesley Sherratt – West Oxfordshire District Council
- Steve Thomas – Oxfordshire County Council
- Toby Warren – Vale of White Horse District Council
- Nick Welch – Oxfordshire County Council
- Wendy Kingsbeer – Cherwell District Council
- Eileen Edwards – Cherwell District Council

Outcomes	Stretch Target
Reduce number of falls among older people living in care homes	By March 2009 reduce the number of falls within the care homes in Oxfordshire by 20% which means a reduction of 1600 falls per year.

Outcomes	Target
Increase the number of people supported to live in their own homes	Increase by March 2009 the number of those supported intensively to live at home from 833 in 2004/05 to 1150

Outcomes	Target
Overarching Outcome: Reduce health inequalities in Oxfordshire	Reduce the gap in life expectancy between the worst quintile and the best quintile for all wards in Oxfordshire by 2% per year April 2009 – March 2009.

Outcomes	Target
Promoting a Healthy Life Style: Reducing adult smoking and exposure to second hand smoking in Oxfordshire.	3,814 quitters in Oxfordshire 2005 – 2006, in line with DOH targets.

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Outcomes	Target
<p>Promoting a Healthy and Active Life Style: Increase participation of adult population in physical activities.</p>	<p>1% Increase in the percentage of population taking part in at least moderate intensity activities and recreation for at least 30 minutes duration 3 days a week from baseline gathered in the Active People survey later in 2006.</p> <p>1% increase per year in the use of leisure facilities by March 2009, measured by throughput or number of members at District Council leisure facilities.</p>

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Outcomes	Target
<p data-bbox="319 401 910 676">Enhance the independence and quality of life for older people and vulnerable people to sustain independent living:</p> <p data-bbox="319 768 910 1043">Enhance the independence and quality of life for older people and vulnerable people so sustain independent living.</p>	<p data-bbox="965 401 1563 733">Increase by March 2009 the number of people receiving Direct Payments to 150 per 100,000 adult population from a predicted baseline of 90 per100,000 in 2005/06.</p>

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Outcomes	Target
<p data-bbox="319 401 910 618">Enhance the independence and quality of life for older and vulnerable people to sustain independent living:</p> <p data-bbox="319 715 872 865">Improve access to information and advice for carers.</p>	<p data-bbox="967 401 1549 1015">To increase to 10% the proportion of carers receiving a 'specific carer's service' as a percentage of all clients receiving community based services from a baseline of 4.9% in 2004/05. This will be an increase from 610 to a minimum of 1240 by March 2009.</p>

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Outcomes	Target
<p data-bbox="319 399 866 621">Integrated approach to preventative services and intermediate care across agencies:</p> <p data-bbox="319 706 872 928">Establishing a countywide common referral and assessment process for preventative services.</p>	<p data-bbox="967 399 1542 564">20% increase in number of referrals from various agencies each year.</p>

Why Focus on Falls

- People over the age of 65 are hospitalised longer and experience more severe injuries than those younger than them
- The patient group at highest risk of falls are those in residential homes (one study quotes 2.7 falls per bed per year, as compared to 30% will have one fall per year for the general elderly population).
- Hip fracture is the most serious related injury following a fall, 30% of those who fracture will die within the first year and 50% will never walk again without assistance
- Falls can make it hard for a person to get around, cause disability, and reduce quality of life. Fear of falling can cause further loss of function, depression, feelings of helplessness, and social isolation.

What we do

Falls specialist nurses:-

- Access residents and the home environment
- Assess risk factors
- Treat the underlying medical conditions
- Recommend and make changes in the home environment
- Review prescribed medicines and recommend hip protectors
- Provide education and training

What has happened

- We have doubled the number of care homes and residents receiving Falls specialist nurse intervention
- A recent review of 50 residents seen during 2006 has found their incidence of falls had fallen by 40% following their specialist assessment. This mirrors our original findings reported in 2005. We are on course to meet our proposed target
- Since our first project in 2005 we have found that more GPs are acting upon recommendations made which include reviewing medication and commencing treatment to prevent fractures
- Care home staff are much more enthusiastic to become involved with the Falls Project following the previous success in 2005