

Report of: Lucy Jackson, Chief Officer/Consultant in Public Health, Adults and Health

Report to: Director of Adults and Health

Date: 12th March 2020

Subject: Leeds Falls Prevention Programme: funding to continue Strength and Balance groups across the city

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has consultation been carried out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Will the decision be open for call-in?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Summary

1. Main issues

- Supporting people living with frailty and preventing falls has been an area of significant focus over the past 5 years through the Self-Management and Proactive care element of the Leeds Health and Care Plan, and as part of the system integration work programme on supporting people living with frailty.
- Injuries caused by falls can lead to loss in confidence, mobility and independence, causing many older people to leave their own homes and move into a care home. In 2013, 31,668 people in Leeds aged 65 and above were predicted to have fallen. This is 1 in 4 (27%) of the population aged over 65. This has a significant impact on both the individuals experiencing a fall and the health and social care system.
- Seeking to address this issue, a review and redesign of the falls prevention activity across the city was undertaken led by Public Health (Adults and Health). Non recurrent funding was provided by the Leeds Clinical Commissioning Groups (CCGs), the Better Care Fund (BCF) and currently through the improved Better Care Fund (iBCF) to develop and deliver a falls prevention programme for the city. This has enabled interventions, such as Strength and Balance Programmes, to be piloted in different settings within the community and a robust evaluation to be carried out, highlighting the positive impact of the programmes to individuals and

the health system. This has resulted in an evidence based, nationally recognised, tiered approach for falls prevention to be established for people aged over 65 who are at risk of, or who have had a fall.

- Evaluation of the strength and balance programmes along with other interventions relating to falls prevention has demonstrated a reduction in admissions to hospital from falls and a reduction in hip fractures. In addition, statistically significant improvements have been observed of falls related outcomes.
- The funding for the current provision (provided through iBCF) is due to end on 31st March 2020. Public Health (Adults and Health), working with partners within the Falls Steering Group has successfully secured funding to continue the falls prevention programme which is currently funded and evaluated through the Improved Better Care Fund (iBCF). The funding of £200,000 per annum from Leeds Clinical Commissioning Group (CCG) has been secured on a recurrent basis.
- It is proposed that Leeds City Council (LCC) through Public Health (Adults and Health) receive this funding for the continued delivery of the 20 weeks strength and balance courses. It is anticipated that these will be delivered via a service level agreement with Active Leeds (LCC). Alongside this there will be the development and trialling of 'homework' sessions for participants to support individuals where needed. The delivery of these courses will be aligned to the Local Care Partnership (LCP) footprint with a potential increase in the number of programmes. The alignment to LCP's will ensure a focus on health inequalities whilst mapping across the footprints to provide the optimum coverage and access within the city. This funding will also be used to maintain delivery of the quality assurance of falls prevention activities in the community and water based strength and balance activities.

2. Best Council Plan Implications (click [here](#) for the latest version of the Best Council Plan)

- This programme supports the Health and Wellbeing priority to reducing health inequalities and improving the health of the poorest the fastest by supporting healthy, physically active lifestyles, supporting self-care, with more people managing their own health conditions in the community, supporting people to age well and enabling people with care and support needs to have choice and control.
- In addition, the continuation of these services reflects the ambition of the Best Council Plan to keep building a strong economy and working compassionately to tackle poverty and disadvantage. This scheme contributes to the reducing health inequalities and supporting active lifestyles priority, through increasing the provision of falls prevention activities across the city.
- In addition, it supports the Age Friendly priority within the Best Council Plan. The work contributes to the aim of 'Making Leeds the Best City to grow old in' which is overseen by the Age Friendly Board, chaired by Councillor Charlwood.

3. Resource Implications

- £200,000 funding per annum will be received recurrently from Leeds CCG to the Adults and Health Directorate under a section 256 agreement and administered through a service level agreement with Active Leeds (City Development).

Recommendations

- The Director of Adults and Health is recommended to note the contents of this report and to approve the following:
- Public Health (Adults and Health) receive funding from Leeds CCG to a value of £200,000 per annum on a recurrent basis.
- Continue and enhance the 20 week strength and balance programmes for people who are at risk of or who have had a fall
- Maintain the existing quality assurance model for falls prevention and water based strength and balance courses.
- Active Leeds (City Development) deliver these programmes on behalf of the Council via a service level agreement with Public Health. A project brief and monitoring arrangements will be developed as part of this.

1. Purpose of this report

- 1.1 To seek approval for Public Health (Adults and Health) to receive £200,000 per annum on a recurrent basis from Leeds CCG.
- 1.2 The report also describes the future intentions for the falls prevention programme within the city and proposes how this funding will be spent.

2. Background information

- 2.1 Supporting people living with frailty and preventing falls has been an area of significant focus through the Self-Management and Proactive care element of the Leeds Health and Care Plan, and as part of the system integration work programme on supporting people living with frailty.
- 2.2 Injuries caused by falls can lead to loss in confidence, mobility and independence, causing many older people to leave their own homes and move into a care home. In 2013, 31,668 people in Leeds aged 65 and above were predicted to have fallen. This is 1 in 4 (27%) of the population aged over 65. This has a significant impact on both the individuals experiencing a fall and the health and social care system.
- 2.3 Over the last five years non recurrent funding has been provided by the Leeds Clinical Commissioning Groups (CCGs), the Better Care Fund (BCF) and currently through the improved Better Care Fund (iBCF) to develop and deliver a falls prevention programme for the city. This has enabled interventions to be piloted in different settings within the community and a robust evaluation to be carried out, highlighting the positive impact of the programmes to the individual and health system. This has resulted in an evidence based, nationally recognised, tiered approach for falls prevention to be established for people aged over 65 who are at risk of, or who have had a fall.
- 2.4 The current approach offers 8 week group falls prevention programmes, delivered through Leeds Community Health (LCH) Community Falls Team; 20 week strength and balance programmes delivered by Active Leeds, City Development, Leeds City Council (LCC); water based strength and balance programmes in two LCC leisure centres and finally, an accreditation scheme (quality assured by Active Leeds staff) of community delivered activities which support strength and balance and/or falls prevention.
- 2.5 The funding for the current provision (provided through iBCF) is due to end on 31st March 2020. Public Health (LCC) has been working closely with partners within the Falls Steering Group to develop the options appraisal and business case for the continuation of this work. This includes representatives from LCC, Leeds CCG, Leeds Teaching Hospital Trust (LTHT), LCH and the Third Sector. The options were presented and agreed at the Frailty Programme Board.

3. Main issues

- 3.1 Evaluation of the strength and balance programmes along with other interventions relating to falls prevention has demonstrated a reduction in admissions to hospital from falls and a reduction in hip fractures.
- 3.2 In addition, improvements have been observed in reported social, wellbeing and falls related outcomes.
- 3.3 As a result, Public Health (Adults and Health), working with partners within the Falls Steering Group has successfully secured funding to continue the falls prevention programme.
- 3.4 The funding secured from the CCG is to enable the ongoing delivery of key elements of the falls prevention programme. This will include the continued delivery of the quality assurance of falls prevention activities in the community, water based strength and balance activities and the 20 week strength and balance courses.
- 3.5 Following the evaluation of the falls prevention programme it was found that the 8 week programmes and 20 week programmes had similar outcomes however the cost of the 8 week programmes was much higher. It was therefore proposed by the Falls Steering Group and ratified by the Frailty Programme Board not to continue with 8 week programmes (delivered by LCH), but to seek to enhance the 20 week programmes and create a tiered approach based on participant ability. The enhanced approach aims to provide a more cost effective model for the city.
- 3.6 Based on this a business case was prepared and £200,000 funding was secured from Leeds CCG on a recurrent basis.
- 3.7 It is proposed that LCC through Public Health (Adults and Health) receive the funding for the continued delivery of the 20 weeks strength and balance courses. It is anticipated that these will be delivered by Active Leeds (City Development, Leeds City Council), with improved referral and triage processes developed. Alongside this there will be the development and trialling of 'homework' sessions for participants to support individuals where needed. The delivery of these courses will be aligned to the Local Care Partnership (LCP) footprint with a potential increase in the number of programmes. The alignment to LCP's will ensure a focus on health inequalities whilst mapping across the footprints to provide the optimum coverage and access within the city.
- 3.8 The 20 week programmes will be delivered by Active Leeds via a service level agreement with Public Health. This will set out the project brief and monitoring framework for this element of the falls prevention programme, and ensure the connection with other programmes to support people living with frailty.
- 3.9 To further enhance the falls prevention provision, funding is being sought through transformation monies to support the development of:
 - Peer support groups
 - Increased volunteer support following course completion to support the group to stay active and remain socially connected
 - Tools to support assessment and support for those at risk of falls who do not currently meet the criteria for group support
 - Drop in sessions at GP practices for group participants with therapy instructors (such as home exercise support)
 - Digital resources to support participants outside of groups/courses

- Targeted support based on need. Where there are higher rates of admission to hospital following a fall more intensive support will be offered as outlined above. In areas where there are fewer admissions to hospital as a result of a fall drop in sessions provided through GP practices will be trialled providing falls prevention education and advice.
- 3.10 Due to the recurrent nature of the funding the total value of the programme exceeds £500,000 and as such is required to be reported as a key decision in the forward plan.
- 3.11 Contracts procedure rules advise that due to their being an internal provider (in this instance Active Leeds) able to deliver the service, even though the value of the contract is high, this provider should be used and no competitive process entered into for the award of the contract.
- 3.12 A service level agreement between Adults and Health (Public Health – Older People’s Team) and Active Leeds will be established to administer the contract.

4. Corporate considerations

4.1 Consultation and engagement

- 4.1.1 The need for the falls prevention programme was identified as an area of concern through data provided in the Public Health Outcome Framework (PHOF) and hospital data. This was due to the high rate of admissions to hospital from falls and rate of hip fractures in people over the age of 65. As a result funding from BCF and then the CCG enabled pilot strength and balance programmes to be delivered comprising of 8 week programmes delivered by LCH and 20 week programmes delivered by Active Leeds.
- 4.1.2 Following the successful pilots of falls prevention strength and balance programmes, the evaluation has indicated significant improvements in outcomes following participation. The evaluation highlighted similar outcomes from both the 8 week and 20 week programmes, but a difference in the cost of delivery.
- 4.1.3 Engagement has also taken place with members of the public through focus groups during the development of the programme and ongoing feedback has been gathered from participants taking part in the strength and balance programmes.
- 4.1.4 Consultation has been undertaken with the Falls Steering Group led by Public Health and comprises of representatives from; Adult Social Care, Leeds CCG, LTHT, LCH, Leeds and York Partnership Foundation Trust (LYPFT), the Oak Alliance, Housing Support, Active Leeds, Leeds Older People’s Forum (LOPF) and Yorkshire Ambulance Service (YAS).
- 4.1.5 Cllr Charlwood has been briefed on 5th March 2020 and the Frailty Programme Board has also been consulted during the development of the approach.
- 4.1.6 Additionally the proposal has been presented to the Executive Management team meeting at the CCG, where the approval was given to fund the programme on a recurrent basis as part of commissioning intentions.

4.2 Equality and diversity / cohesion and integration

- 4.2.1 An Equality, Diversity, Cohesion and Integration Impact Assessment has been completed for this project. This tool indicates that a full assessment is not required as the recommendations of the report will not impact negatively on service users, staff or stakeholders. The assessment will be submitted alongside the report for the Delegated Decision Panel.
- 4.2.2 The falls prevention programme aims to increase capacity to support older people living with frailty and prevent further falls and hospital admissions. The programme offers appropriate lifestyle interventions and treatment to reduce their overall risk with a focus on reducing health inequalities.
- 4.2.3 During the pilot of programmes focus was given to areas of deprivation due to the rate of falls per population being higher in these areas. Review of the data has shown that since the implementation of the programmes, the reduction in rate of admissions to hospital for falls has been more significant in these areas.
- 4.2.4 The delivery of the programme will be aligned to the Local Care Partnership (LCP) footprint with a potential increase in the number of programmes. The alignment to LCP's will ensure a focus on health inequalities whilst mapping across the footprints to provide the optimum coverage and access within the city.
- 4.2.5 Demographic information and quarterly outcome data will be collected to ensure we are taking into account the needs of people with protected characteristics including age, race, gender and social class.

4.3 Council policies and the Best Council Plan

- 4.3.1 The delivery of this programme supports the vision of the Leeds Health and Wellbeing Strategy 2016-2021. It contributes to outcome 2: People will live full, active and independent lives, and outcome 5: People will live in healthy, safe and sustainable communities.
- 4.3.2 Ensuring the continuation of these programmes reflects the ambition of the Best Council Plan to keep building a strong economy and working compassionately to tackle poverty and disadvantage. This scheme contributes to the reducing health inequalities and supporting active lifestyles priority, through increasing the provision of falls prevention activities across the city.
- 4.3.3 In addition, it supports the Age Friendly priority within the Best Council Plan. This work contributes to the aim of 'Making Leeds the Best City to grow old in' which is overseen by the Age Friendly Board, chaired by Councillor Charlwood.
- 4.3.4 The services delivered through the falls prevention programmes supports the delivery of the Leeds Health and Care Plan through the Self-Management and Proactive Care Board and the population health management approach that has been taken for the Frailty Segment. It is embedded within the proactive model designed by the Clinical Frailty Strategy Group, which is being implemented at LCP level.

Climate Emergency

- 4.3.5 By aligning the programmes more to the Local Care Partnership (LCP) boundaries and increasing the provision geographically it is anticipated that transport and travel needs will be reduced thus support the aims set out in the climate emergency plan. In addition the programme supports people living with frailty to be more active therefore supporting active travel.

4.4 Resources, procurement and value for money

- 4.4.1 The total value of the proposals contained within this report is £200,000 per annum on a recurrent basis. This will be met through funding secured from Leeds CCG which will be transferred to Public Health (Adults and Health) via a section 256 agreement.
- 4.4.2 The funding will be allocated to deliver the falls prevention programme of strength and balance, quality assurance for falls prevention activities and water based strength and balance.
- 4.4.3 There is an appropriate internal provider, the contract will be administered through a service level agreement under the Third Party Framework Agreement between Public Health (Adults and Health) and Active Leeds (City Development), not opening up a procurement process under contracts procedure rules.
- 4.4.4 This approach retains funding within LCC and provides the best value for money as well as providing stability to local authority staffing and resources.
- 4.4.5 To date the falls prevention programme has evidenced a positive impact on participants through quarterly monitoring. This positive impact includes improved falls related outcomes and improved wellbeing.
- 4.4.6 This service is a key part of the developing a proactive frailty model in Leeds. This is set within the overall approach that the city has signed up to with Population Health Management.

4.5 Legal implications, access to information, and call-in

- 4.5.1 As the overall value of this decision is expected to exceed £500,000 this decision is a key decision and is subject to call in. There are no grounds for keeping the contents of this report confidential under the Access to Information Rules.
- 4.5.2 There is an appropriate internal provider (Active Leeds, City Development), therefore the contract will be administered through a service level agreement under the Third Party Framework Agreement, not opening up a procurement process under contracts procedure rules.

4.6 Risk management

- 4.6.1 The proposed approach aims to minimise the risk of:
- 4.6.1.1 Losing continuity and valuable learning from the existing provider and enables the evaluation of the service to continue to build a longer term picture of health and social care usage.
 - 4.6.1.2 Destabilising local authority staffing and resources

- 4.6.2 An updated project brief is being developed and work will be undertaken to agree the monitoring requirements for the falls prevention programme. The service level agreement will be monitored by officers in the Adults and Health directorate.
- 4.7 Governance for the falls prevention programme will be provided to the Frailty Programme Board through the Falls Steering Group.

5. Conclusions

- 5.1 Funding for the current falls prevention programmes provided through iBCF comes to an end on 31st March 2020.
- 5.2 Following a robust evaluation of the programmes, options have been considered and consulted upon with a revised model being agreed upon. A successful business case has secured funding on a recurrent basis from Leeds CCG.
- 5.3 The funding enables the continued provision of 20 week strength and balance programmes, quality assurance of falls activities and water based strength and balance. An uplift in the funding to £200,000 per year provides the ability to increase the number of programmes to align to LCP's and develop the provision further.
- 5.4 The funding will be transferred to Adults and Health from the CCG under a section 256 agreement on an annual basis to fund the falls prevention programme, to be administered through a service level agreement between Public Health and Active Leeds.
- 5.5 Governance for the falls prevention programme will be provided to the Frailty Programme Board through the Falls Steering Group.

6. Recommendations

- 6.1 The Director of Adults and Health is recommended to note the contents of this report and to approve the following:
- 6.2 Public Health (Adults and Health) receive funding from Leeds CCG to a value of £200,000 per annum on a recurrent basis.
- 6.3 Continue and enhance to 20 week strength and balance programmes for people who are at risk of or who have had a fall
- 6.4 Maintain the existing quality assurance model for falls prevention and water based strength and balance.
- 6.5 Active Leeds (City Development) deliver these programmes on behalf of the Council via a service level agreement with Public Health. A project brief and monitoring arrangements will be developed as part of this.

7. Background documents¹

- 7.1 None.

¹ The background documents listed in this section are available to download from the council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.