

**National Implementation Team
Falls Prevention and Bone Health Meeting
12 February 2014 at 8.30 am, Library Meeting Room,
Dr Steeven's Hospital**

Present:

Irene O Byrne Maguire, Anne Marie Ryan, Lean O'Flaherty, Dr Declan McKeown, Neil Dunne, Noel Mulvihill and, Mary Morrissey.

Dial In by teleconference Dr Tara Coughlan, Geraldine Delorey Niamh McMahon, Dr Kieran O'Connor, Marguerite Clancy, Dr Helen Flint, Emma Benton, Pascal Moynihan and Prof Rose Anne Kenny.

Apologies: Brian Murphy, Dr Emer Ahern and Dr J Clarke.

Discussion/ Action Point/Summary	Discussion	Designated person / Actions
1. Introduction	Minutes of last team meeting (11 th November 2013) reviewed and accepted. ➤ AMR welcomed Prof Kenny onto this team; Prof Kenny comes with a wealth of knowledge in the area of falls prevention, bone health and the older person.	
2. Governance Update	<p>A) NCEC progress</p> <ul style="list-style-type: none"> ➤ Update re literature search and review was given. More work is required around this. Gethin White, HSE Librarian and Dr McKeown helping with literature review, more assistance from the team was requested. M Morrissey volunteered to help with this work. ➤ It was proposed that the assistance of an economist to examine the cost of falls and associated treatments may be beneficial to this team and this work. Dr Flint suggested that Ms Valerie Walsh may be in a position to assist with this work, Dr Flint to forward contact details for Ms Walsh to IOBM. ➤ It is hoped to complete the work required in time for the National Patient Safety Conference 2014 (November) ➤ Collaboration with Dr John Carey and team has commenced re osteoporosis sections. ➤ It is anticipated there will be two guidelines for falls prevention and bone health, which will make reference to each other and be launched together. <p>B) Status of National Sponsorship Team</p> <ul style="list-style-type: none"> ➤ This team have met three times in 2013 and are being kept abreast of activities and inputting same as needed. <p>C) Status of National Implementation Team</p> <ul style="list-style-type: none"> ➤ Two new members have joined the team, Prof Rose Anne Kenny and Dr Miriam Casey both work at St James Hospital and have an interest in falls prevention and bone health in the older person. ➤ Brian Murphy informed the team that he can no longer stay involved with the AFFINITY project due to current work load and is resigning from the team. AMR/IOBM to pursue replacement. Dr Joe Clarke will continue to be the National Care Programme Primary Care representative on this team ➤ The Regional Implementation teams have requested an update on what developments the NIT are making and the issues that are discussed as agenda items at the meetings. AMR and IOBM to address this. ➤ It was proposed the NIT would look at developing a standardised process as to how falls and fracture prevention can be addressed. A standardised approach is the best way of improving and measuring how outcomes can be achieved for patients, using pathways of care that are developed and/or adhered to. Champions for falls and fracture prevention will be required. Databases like the IRISH Hip Fracture Database can be helpful in working towards standards. ➤ It was highlighted that the AFFINITY project needs to get onto the ISA 	<p>IOBM/DM/ MM</p> <p>HF/IOBM</p> <p>NST</p> <p>AMR/IOBM</p> <p>AMR/IOBM</p>

	<p>managers' agenda. Best way of addressing this is to get time on the Social Care leadership meeting. NM and AMR to follow up.</p> <ul style="list-style-type: none"> ➤ The NIT have asked the national Single Assessment Tool (SAT) team for clarity on a number of issues, AMR awaiting response on this. ➤ A query was raised in relation to the supply of aids and appliances and in particular in relation to falls prevention, does this team have any influence on the supply on this equipment. The cost of this equipment on local budgets can be an issue. AMR to follow up on same. <p>D) Status of Regional Implementation Teams</p> <p>Currently a joint RIT has been formed with Primary Care and Older Persons as joint leads for their respective HSE Administrative Areas. QPS personnel from all four areas are involved where required.</p> <p>Physician leads, authorised by the NCPOP, have been confirmed:</p> <ul style="list-style-type: none"> Dr Siobhan Kennelly HSE DNE and Dr Rachel Doyle HSE DML, Dr Pat Barry HSE South Dr Jude Ryan HSE West <p>Dr Frances McCarthy is to be invited to co-lead with Dr Kennelly in HSE DNE RIT</p>	<p>AMR/NM</p> <p>AMRAMR</p> <p>AMR</p> <p>Joint RIT members</p>
<p>3.</p> <p>Project Plan</p> <p>2013 Update</p>	<p>A) Identification, selection and launch of pilot sites/early adopters</p> <ul style="list-style-type: none"> ➤ Work is on-going on collating and analysing baseline data per area, to help determine selection of pilots/early adopters. ➤ Baseline shows "pockets of good practice" happening nationally. ➤ It is anticipated that pilots will be identified Q2 2014. A teleconference with the joint RIT is being held by monthly to discuss progress and challenges. <p>B) NAG Medication Management OP work stream</p> <ul style="list-style-type: none"> ➤ Assistance was sought from the National Advisory Group for Older Persons on finding a pharmacy resource/medicine management lead for the NIT. AMR following up on this. ➤ Niamh Mc Mahon, who is a member of this team, is available to the NIT on a consultative/advisory basis, as her extensive work commitments allow. ➤ Niamh outlined the importance of proper medication management for older persons in relation to falls and highlighted that it might be useful to concentrate on specific drug groups in relation to this. ➤ Some HSE regions have very good links with pharmacists both in the community and in acute hospital setting and it may be possible for the regional implementation teams to tap into this support. Ger Creedon and Donal Carroll, Chief Pharmacists St John's Hospital and St Luke's Kilkenny respectively, have agreed to operate in an advisory capacity to HSE South RIT and HSE West RIT respectively. ➤ Draft paper on what drug groups the team should concentrate on for this year to be drawn up. Prof Kenny, H Flint and N McMahon agreed to assist with this task. <p>C) Emergency care and Transportation work stream</p> <ul style="list-style-type: none"> ➤ A conversation was held between IOBM and Una Geary, CCPEM lead on in relation to emergency care and older persons who fall. It was acknowledged that the effective management of falls in the community will enable admission avoidance. Additional work on this is required. ➤ EB highlighted that the AHP are involved in a work stream looking at lower back pain and mechanical falls. Contact has been made but progress is slow due to their competing work demands. ➤ The importance of trying to reduce numbers of people falling in the community and then when a fall occurs, treating older persons effectively in the community in an attempt to avoid hospital admission was outlined. More work between primary care, acute hospital services and the ambulances services is required to address this issue. ➤ A meeting with the NAS should be scheduled in an attempt to address the number of patients who fall and are brought to the ED for treatment. AMR to follow up on same. . 	<p>RITs</p> <p>AMR</p> <p>NMcM</p> <p>AMR/IOBM /RK/HF/NM</p> <p>IOBM/EB</p> <p>AMR</p>

4. Change Management Supports	<p>A) Change Management Science</p> <ul style="list-style-type: none"> ➤ KPI sub group formed with members of the NIT, led by AMR and Mary Morrissey, to examine what data could be collated by RITs to measure improvement and the capacity of teams to do this. ➤ Marguerite Clancy outlined a piece of work that is commencing in the Clare PCT and it may be possible for pilot sites to take on board the learning's from this ➤ Prof Kenny highlighted the importance of collating accurate data, having proper systems in place to support this was vital in order to measure parameters correctly and show improvement in patient's outputs. ➤ AMR had written to Health Intelligence to explore the possibility of securing a statistician to assist with data collation and showing trends, outputs etc. M Morrissey agreed to follow up on this. <p>B) Education and Training Update</p> <ul style="list-style-type: none"> ➤ Preliminary Training Needs self-Assessment findings show that there are deficits in the understanding and application of quality improvement tools to help ensure better outcomes for service users. to determine training needs of pilots – multi professional training suitable for all settings. DNE Performance & Development Unit providing help with this. TNA to be developed over the next 2 months with support of MM and GD. Conversation was held with E McKeown, Change Manager, HR DNE in respect of coaching support for the RITs, it may be possible to provide this per HSE area. Additional work required on this issue. ➤ A meeting has been scheduled with HSE Procurement for 31st March 2014 to discuss the training proposal. We need to examine on whether an EU tendering process will be required. If not how best to approach securing one of the Faculties to deliver this training. <p>C) Web-based Repository</p> <ul style="list-style-type: none"> ➤ Repository prototype is being developed by SCA. Expect to circulate URL for review in the next few weeks. ➤ We are in communication with HSE ICT security and communications as to possible hosting of the repository on HSE website. Currently only HSE staff with HSE email addresses can access HSE site. ➤ Work has commenced on sourcing licenses to use RCP UK Fallsafe –e learning package, Falls Prevention in Hospitals. St Mary's in the Park have developed e learning resources for community and residential care that are available to us at www.bonehealth.co. <p>D) EIP-AHA Contribution</p> <ul style="list-style-type: none"> ➤ IOBM continues to represent the Irish Partner Commitment in EIP-AHA European project on active and healthy ageing, starting with a falls initiative. Read more http://ec.europa.eu/research/innovation-union/index_en.cfm?section=active-healthy-ageing ➤ During E health Week (Dublin, May 2013) Minister for Health committed to the development of an E health Strategy for Ireland by the end of 2013. 	<p>AMR</p> <p>MM/AMR,</p> <p>IOBM, AMR, MM</p> <p>IOBM/AMR</p> <p>IOBM</p> <p>IOBM</p>
5. Confirm meetings for 2014	<p>The dates for the next meetings is Wednesday May 14th 2014 from 8.30-10.30 am in the Library meeting room, Dr Steeven's Hospital.</p> <p>A Teleconference facility will be provided for those unable to travel to the meeting.</p>	All