

Affinity EIP-AHA Commitment Briefing April 2015

The HSE commitment is to actively progress the implementation of the 'National Strategy for the Prevention of Falls and Fractures in Ireland's Ageing Population' hereafter known as the National Strategy, working within the context of existing economic constraints. The strategy recognizes the need to work in collaboration with multiple stakeholders to build greater societal, multi-stakeholder and professional awareness, strengthen individual and organisational cooperation capacities, streamline more clinically effective, evidence-informed and high quality service delivery, and support innovative mechanisms to achieve a safer, age friendly environment. Built on the principles of empowering patient self-management and autonomy, the early detection of risks, and the availability of appropriate preventative interventions, the approach will optimise the opportunity to use innovative assessment and screening mechanisms, tools, guidelines and assistive technologies to deliver seamless services to support a vision of a 'life free from (harmful) falls and fractures in Ireland's ageing population'. In addition to national stakeholders, the HSE commits to participate within a network of other interested pan-European stakeholders within the framework of the European Innovation Partnership on Active & Healthy Ageing (EIP-AHA), to share best-practices, to strengthen measures for monitoring and service improvement, and to contribute to the alignment of data-registries across EIP-AHA participants.

Core Tasks	Progress to date	Targets when fully operationalised
Develop a new falls and fractures clinical care pathway/process involving screening at multiple points of entry, decision algorithms, and assessment mechanisms.	Social Care in collaboration with Primary Care, Acute Hospital and Health and Wellbeing Division continues to implement the National Strategy to prevent falls & fractures in Ireland's ageing population. HSE Operational Service Plan 2015 has included four early adopters for scaling up in four/nine Community Health Organisations (CHO) . Informed by the learning from the early adopters, identify further integrated care pathways for falls prevention and bone health in additional CHOs (5)	<ul style="list-style-type: none"> • Full implementation of the "National Strategy to prevent falls & fractures in Ireland's ageing population" will mean that persons 65 years and older will be proactively co-producing their own health & wellbeing, benefiting from timely falls & fracture prevention interventions. • All CHOs will have accessible integrated care pathways, across all care settings & specialities, servicing the needs of a defined population. • Harmful falls & fracture admissions will be reduced by 20%. • Increasing awareness and self-management will be evident in AT RISK groups, their families, communities, health & social care personnel & policy makers. • There will be evident sufficient capacity among health & social care personnel & communities to deliver validated operational services, aimed at reducing falls & fractures
New national guidelines to support the new pathway at different entry points	Work was commenced in 2014 but stalled in Q3/4 due to limited resources.	
New national standards to support information dissemination and falls prevention awareness	Work is needed to institute a National Active & Healthy (Ageing) month in October annually in line with other EU countries, using EIP-AHA resources piloted in Europe in 2013/2014; Communication Strategy (pending) & Change Management supports (in progress) required to enable the work.	
Adoption and adaption of a new 'Single Assessment	Single Assessment Tool is currently being rolled out nationally in electronic form. Falls & bone health multifactorial assessment requirements are included but	

Tool' during the further development of the project.	disseminated throughout. The need for electronic support to collate the findings so as to determine appropriate interventions has been flagged to Rachel Fitzgerald, SAT Project worker and previously HSE AFFINITY Co Lead - April-September 2014.	<p>in older persons & AT RISK groups.</p> <ul style="list-style-type: none"> • Safer age friendly physical environments will be evident.
The development of registers including a hip fracture registry within the HIPE database.	Irish Hip Fracture Database within HIPE has delivered its third annual report and all 16 trauma centres are now reporting. Primary and Community Care is piloting within early adopters an MDT excel database to record its process activity levels. National Incident Management System (NIMS) is the national risk management system for the reporting and management of incidents, including falls and fractures reported by publicly-funded health & social care providers.	<p>Milestone Benefits achieved as a consequence of awareness raising, capacity building, quality services and environmental improvements will be as follows:</p> <ul style="list-style-type: none"> • Reduce incidence of hip fracture by 20% and associated costs (Mean DRG Cost 2005-2010= €13,346 per patient) • Reduce incidence of older persons being treated for falls by 20% • Reduce hospital admissions secondary to a fall related injuries Reduce nursing home admissions secondary to a fall related injury hip fractures • Reduce ambulance call outs • Reduce A&E presentations • Reduce rehabilitation admission requirements • Reduce home care package requirements • Reduce mortality rates secondary to falls & falls related complications • Reduce bed days utilised secondary to falls & falls related injuries. <p>Implementation costs will be delivered by savings generated from ongoing efficiency gains. Milestone timeframes will be dependent on resources leveraged to support the change trajectory and capacity building capabilities of early adopters to delivered proactive integrated care services for 100 per cent of their defined population of older persons.</p>
The encoding of future care pathways on-line tool to provide pathway contexts to users.	Work is progressing within the Measure & Monitor work stream to propose and gain agreement on a national framework of metrics, to include structural, process and outcome measures. A prototype dashboard to aid the monitoring of key information sources relevant to falls & fractures is being explored.	
Connecting existing home-based tele-care systems and services to the falls-early 'at-risk' screening mechanisms	This needs scoping. Project resource currently insufficient.	
Development of a 'falls & fractures community of practice' using the HSELAND web-portal to promote practice development	Uni-disciplinary resources are available on HSE Land. The multi-disciplinary UK FallSafe programme for hospitals has been made available for uploading to HSE Land or other password protected site. Peer Learning Remote Sessions (x 4) were instituted in 2014 to share learnings and best practices. An Area 9 early adopter has developed a Community of Practice for providers of disability services. A Foundation Education Programme has been developed with slides and will be made available on dedicated AFFINITY Repository.	
Support bone-health promotion in schools	Work is needed to institute a National Active & Healthy (Ageing) month in October 2015 in line with other EU countries , using EIP-AHA resources piloted in Europe in 2013/2014	