

Engagement Alliance



FALLS

Public Engagement Activity: September and October 2016

METHOD

Workshop style sessions were held within settings where people would already be meeting.

Demographic information was collected and collated in each group.

All comments made by group members in the context of the sessions were recorded by facilitators on standardfeedback sheets.

Comments where analysed by grouping them and creating 'Istatements'.

Programming suggestions have been made based on the 'I statements'

WHO WE SPOKE TO:

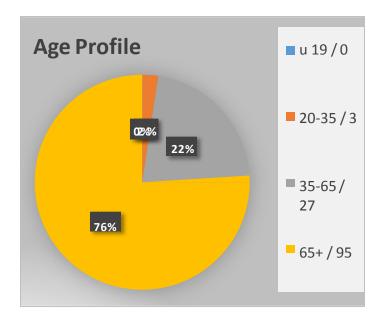
126 Individuals

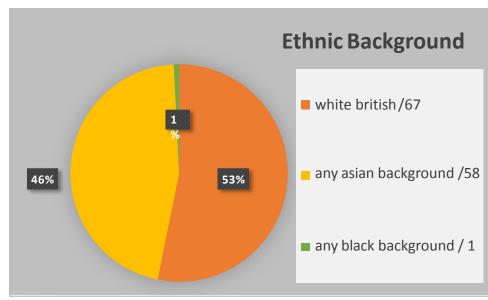
26 Male : 46 female

Of those who filled in demographic data

- 25% described themselves as disabled
 - 10% described themselves as carers

Sessions targeted to meet older people and people from different ethnic backgrounds





WHO WE SPOKE TO:

Session Date	Session Host	Group Description	Number of People
20.10.16	Harwoodlunch club	Retired individuals supported by volunteers to access lunch and social interaction	17
11.10.16	Healthwatch Forum	Members of the public interested in Healthwatch Long term unemployed people referred to Ingeus UK Ltd by DWP for	22
27.9.16	Ingeus Uk	support to getback in the workplace	13
18.10.16	Senior Solutions	Group of older people who have been identified as at risk of social isolation	20
26.10.16	Seva Dal ofBolton	BME groupaged 50+	54

WHAT WE ASKED

• What do you know about falls? Have you or someone you know had a fall? How did it happen? What caused it?

• Can you think of the consequences of having a fall? Are you anxious about falling? Does that anxiety stop you doing anything?

What can you do to lessen the chances of you falling or tripping?
 What would help you recover from a fall?

PREVENTING FALLS

I might need to look at the falls risks in my bathroom

- I fell behind the bathroom door
- I've had falls in the bathroom.
- Exiting the shower
- Stepping out of the shower
- Getting out of the bath

I might need to think about risks in the garden

- In the garden
- Falling in the garden, mowing lawns
- Bad fall in the garden, slippy
- gardening
- I fell in the garden pegging washing out

I might need to look at risk around using steps or ladders

- Rushing up and down stairs at home
- Leaving things on the stairs
- Fell from the steps and tripped over the ladder
- I missed a step and fell
- I fell from a loft ladder
- Fell on the stairs
- Ladders and work related falls

I might fall whilst doing an every day task

I might need to think about some other every day hazards

- Walking around the house but shuffling and mind elsewhere
- Loose rugs
- Badly fitting footwear
- Shoulder bags
- Equipment use
- A lady fell off a commode in hospital as no-one came to assist her
- Most falls happen in home,
- Incorrect footwear,
- Handheld devices
- Children's toys
- Trip over animals and children
- I often just fall over the dog in the house
- Putting shopping away
- Getting out of bed
- Loose cables / hazard

I would like public transport companies to be more aware

- Buses not coming right to the kerb so if you have to step down into the road and then up to the bus
- The bus drivers don't use the rise and fall step
- Finding that buses don't lower their access door to ground level and be flat to the road
- Bus stopping suddenly
- Falling on bus because it stopped too quickly

I would like better steps and flooring

- Unmarked steps even in the opticians
- Steps
- One fall on the escalator in Market Place
- Stairs in public buildings patterned and carpeted so easily unseen
- Flooring in the shopping centre and Market Place seem slippy and I can't walk on them so I don't go in
- Things not being clear particularly in the town centre

I would like less slippery pavements

- Slippy ice
- Fell on ice
- Slipped on ice
- Ice
- Slippery paving
- Change in weather: icy slops, raining

I might fall when I go out

I would like kerbs and pavements and street lighting to be fixed

- Tripping up kerbs
- Tripping on kerbs
- Uneven pavements on Newport Street nr the Octagon
- High kerbs
- Bad paving
- Uneven pavements
- Darkness feel of pavement and lighting
- I use a wheely zimmer frame and the wheels got stuck in the pavement. It stopped suddenly and it tipped and I fell
- Tripped on a footpath

I might fall because of health issues or a disability

If I have had specific physical injuries, weaknesses or operations I need falls advice and support

- Poor mobility
- I have a bad back which affects my balance and causes me to fall
- I have a hip problem which causes me to fall regularly

If I have had a blackout, dizziness, stroke or seizures I might need some help and advice around falls

- Sudden loss of consciousness
- Dizziness
- I had a fall gardening but didn't know I had until I saw blood.
 They think I had some sort of stroke
- Seizures
- Stroke and physical disability, dizziness
- Temporary blackout
- Dizziness

If I have poor eyesight I might need advice on falls

- I'm registered blind and have had a few falls
- I lost some of my sight after a stroke and now use a white stick
- Sometimes but I've had no follow up to assess my falls risk. I had a lot of support from the stroke unit but would have liked more general follow up. The optician has been very good
- Sight problems
- Partially sighted
- New spectacles
- I stumble a lot due to lack of vision

If I have MS or Parkinsons or epilepsy or diabetes I need some falls prevention advice

- 3 people suffered from epilepsy which can cause falls, particularly one gentleman who is light sensitive
- I have MS which causes some mobility problems.
- Since the reduction in the podiatry service I no longer receive foot care even though I am diabetic. This can contribute to my falls
- My husband has Parkinsons and falls all the time due to medication and freezing
- If you suffer from BP, diabetes and some medications can cause you to fall
- Low sugar and blood pressure and loss of balance

If I have any of these conditions or symptoms I would like advice on falls from my medical or primary health care team

If I have blood pressure issues I might need some advice about falls risks

- If you suffer from BP, diabetes and some medications can cause you to fall
- Low sugar and blood pressure and loss of balance
- High blood pressure
- Blood pressure is down

PREVENTION RECOMMENDATIONS

- 1) Prevention home visits (by, for example voluntary sector provider) should address falls risks in bathrooms, in gardens, associated with steps and ladders and icy pathways.
- 2) Regular visitors to the home (for example carers, housing providers, befrienders as well as family and friends) should address risks in bathrooms, in gardens, associated with steps and ladders and icy pathways.
- 3) Public Authorities and amenities should:
 - Address risks associated with steps and escalators
 - Deal with ice effectively
 - Fix problem paving and kerbs

- 1) Public transport companies should consider including falls awareness training for staff.
- 2) Health professionals should provide tailored advice on falls prevention to people suffering from;
 - Dizziness, blackouts, blood pressure problems and seizures
 - MS, Parkinson's, epilepsy, history of stroke and diabetes
 - Poor eyesight
 - Certain physical injuries or weaknesses
- 3) Self Care Advice; take care and remove the cause, use your aids, wear sensible shoes, look after yourself and others

RESPONDING TO FALLS



Some people in all the groups we spoke to had experience of falling.

In the older age groups and amongst people with specific conditions (epilepsy, MS, Parkinsons) people had experienced multiple falls.

A wide variety of situations and causes of falls were shared.

- I have had a number of falls and broke my shoulder 3 times but until today I have never heard about the falls team
- I'm registered blind and have had a few falls
- I fell behind the bathroom door and my husband couldn't get in. He sent for an ambulance and the Rapid Response paramedic climbed over the top of the bathroom door. I was taken to hospital and stayed overnight I've had falls in the bathroom.
- I broke both hands and was in hospital for 3 weeks.
- 2/3 falls out walking. I don't pick my feet up properly and don't take notice of my surroundings
- 3 falls and two broken arms
- Exiting the shower which resulted in 3 weeks hospitalisation
- I fell on ice last winter and it has caused me back trouble ever since

- Fell over a stile and broke clavicle and dislocated shoulder
- I was going to the dentist and getting on the bus I fell reaching for my bus pass and fractured my pubic bone
- I was putting shopping away in the freezer and fell backwards – sometimes I go dizzy
- I fell two weeks ago getting out of bed I went dizzy and fell on to the wardrobe door. I am very unsteady now, frightened to go to bed and sometimes forget to eat
- I fell against a unit walking across my lounge. I don't know whether it's connected but I have cancer in my head
- Our neighbour is about 70 she went over on her ankle and broke it in two places – because of that she missed an appointment with her specialist and has since gone blind and was confined to her room for months

- I've had a few single falls through tiredness, dizziness, reaching for things, turning around, forgetting to eat
- I fell backwards down 14 stairs
- I've fallen 3 times in the bedroom rushing
- I fell in the road and a car just missed me I broke my ankle and knee and also had stitches. I stayed in hospital
- I fell gardening, broke my wrist and had an operation.
- After that I had a bone density test and doctors gave me calcium tablets. I drink and eat lots of orange juice and have a good balanced diet
- Just walking and fell and next door neighbour got me up after 10 minutes
- Fell once
- I fell in the garden pegging washing out

- I missed a step and fell
- I fell from a loft ladder. It was a bad fall so I had a back problem and for 6 months was in and out of hospital
- Very common in older people. I have had several falls due to dizziness
- I fell when one side of my body went numb and I fell down
- I fall once or twice a month
- I fell getting out of my car but I don't know what happened
- I stumbled and fell recently
- I have fallen a few times but not recently because I have been taking care of myself
- Two or three times

The Falls service is not well known, people don't know how to be referred.

People who have fallen not necessarily referred to the Falls service.

People would like Falls risk assessment of part of their basic health and care support (preventative).

I would like to see the Falls Team

I need clear information on what to do if I have a fall

I need to know which service will respond to what situation

- I don't know who to call first, is it an ambulance, family,
 neighbour? I'd like some information on who I should call first.
- Who do you call when you have a fall ? you need to make a
 decision about whether to ring 999 and ask for ambulance or
 whether to ring for a family member or a friend.
- My wife had a fall which needed us to contact the Ambulance Service where we were directed to the Minor Injuries Unit. We had good care and the Rapid Response help was good.
- I was referred to the Falls clinic and Careline was put in place.
- I now use Careline/Anchor.
- I had to ring an ambulance.
- I attended A & E.
- My 82 yr old neighbour fell in his home. He rang Careline for help but they refused to come out to him. He had to wait until his carer called in hours later. He ended up in hospital and is now bedridden.

RECOMMENDATIONS RESPONDING TO FALLS

- 1) There is an urgent need for clear and consistent information on what to do and who to contact if you have a fall.
- 2) Consideration could be given to a dedicated falls response number/service.
- 3) People would like a falls risk assessment done as part of their annual health check.
- 3) People need more information about the Falls Team, what it does and how to get referred.
- 4) Referrals to the Falls Team need to be consistent.

RECOVERING FROM A FALL

I might need some help to recover and adjust

I have lost some confidence

- Lack of confidence
- Reduction in confidence can lead to isolation and dependence
- Breaks and loss of confidence
- Restricted mobility
- It knocks your confidence
- Lost all confidence
- Lack of confidence
- Lost confidence

I might need some help in improving my balance

- I lose balance
- Lack of balance
- Loss of balance
- Uncertainty of putting foot forward going down steps through muscle weakness

I have lost my livelihood

- Not being able to attend work
- Loss of earnings

I am more anxious

- Scared of going out as nowhere to sit and rest and pavements feel slippy
- Anxiety
- Frightened
- Fear of falling again
- Acute anxiety
- Very anxious. I am aware of the situation and try not to fall
- Anxiety
- Worried
- Very anxious
- Worried about it happening again
- I get worried about going to bed –
 sometimes when I lie down the room spins
 round
- I am frightened of falling as I know I am vulnerable. I use aids to feel more secure
- It leaves you feeling frightened
- I'm not anxious, it doesn't stop every day life
- I don't worry that much

I have sustained injuries

- Fracture
- Breaks and loss of confidence
- Breaking limbs
- Permanent injury
- Short term injury
- Medical concerns/injuries as a result of a fall
- Banged head, bruised body
- Broken hip
- I went to hospital and had 2 stitches near my right eye.
- Pain
- Broken bones
- Hurt yourself
- Injury to bones

I need support
that recognises the
psychological and the
practical impacts of the
fall

I need appropriate housing

- My bungalow is appropriate, some peoples housing isn't
- Some people who may end up in a wheelchair or using a scooter as a result of falls may not be able to get out later as their garden gates are not wide enough or there are steps to their house or the pathway is gravel so the scooter wheels get stuck. This happens in Johnson Fold and the elderly residents can be isolated if their home has not been assessed

I have lost some independence

- Loss of independence
 Isolated/housebound
 Loss of social life and independence
- Reliance on other people
- It frightened me so I don't go to the shops any more
- I don't go shopping now
- I don't like having a shower

My family need some support and advice

- If you are a carer and you can't look after the people you care for
- Sometimes a family member falling can have an impact on the wider family who have to then offer more support
- Family worry about having to take time off work

RECOVERY RECOMMENDATIONS

- 1) All services need to take a holistic view when following up people who have had a fall. Advice on matters such as housing and finances as well as psychological support (through something like 5 ways to wellbeing, perhaps) need to work alongside re-ablement services.
- A high number of people at the groups we visited had experienced falls. Consideration should be given to providing support for problems such as confidence, anxiety and balance in group settings like these. As well as supporting people already accessing groups, referrals to such activity could help to build new support networks for people who might become isolated after a fall.
- 3) Information and advice for family members may reduce anxiety, increase independence and support recovery.

THESE FINAL SLIDES PRESENT DIRECT SUGGESTIONS MADE BY PARTICIPANTS DURING THE COURSE OF THIS WORK

TO EVERYONE



Take extra care and expect the fact of your situation.

If you need a stick or other thing use it, like handles near bath, toilets, door etc. When you get out of the bath take extra care......Make sure everything is on the right Not wet floors......Look after yourself and others........Watch where you are going......Be aware If you are vulnerablemake sure someone is with you......Do not use a ladder when alone **Get fresh air.....Slow down....**Be careful in the bathroom. I try to get someone else's support when I go out for a walk Take care and use your stick if you have one......Walk instead of rush.....Be careful Always keep your walking stick with you and be careful walking inside and outside of the house Be careful......Be careful and remove the cause......keeping walkingExercise Awareness......Putting things away Wear your spectacles and use your aids and adaptations in your home......Wear sensible shoes Dry yourself after your bath/shower......Plan ahead to avoid rushing......Limit use of handheld devices

Don't rush about as much......Balance and wearing the right footwear......Take care

To Councillors, Environment Services and Town Planners

Send the town planners and councillors out on public transport for a week and they may see some of the issues for themselves.

Mark uneven surfaces.....marked hazards in public places

More seating......More dropped kerbs.....Safer environment

Seating and benches......Council need to do better gritting in the winter

More grab rails on buildings and deep slopesAccess ramps and tactile pavements

Disabled friendly pavements to enable wheelchair and buggies to get on and offeasily

Have a slow and fast lane in the supermarket......Keep pavements safe.....Pot holes in the road need repairing......Council buildings should look at the height of their steps

In the town centre new pedestrian area and around Victoria Square the benches and seating have been taken away. If someone is frail, unwell, they cannot sit down and rest so are more at risk of a fall.

Stop reducing public seating areas....Shops to keep their floors safe and be more aware of hazards
Salt icy pavements not just roads in winter, particularly around elderly bungalows/accommodation, care homes, clinics, etc.

Lack of seating in shopping areas in Bolton. Can cause people to fall and stumbleif they haven't rested The new Bolton Interchange is too far from the market and shops for some people so the Council need to consider the route people will use

Consider what's being planted and where and what hazards they may cause

Clean pavements in winter. Wet leaves are a hazard. Clear them even if it's once a week

I suggest



To Public Transport Operators

Drivers on public transport should slowdown

Bus drivers often will not use the rise and fall steps unless you use a wheelchair or scooter or push a pram.

Sometimes the elderly or people with chronic conditions cannot use a higher step

Bus drivers should not set off until an older person has satdown

Public transport – dropping the level of the access and getting close to kerbs. Some buses seem able to get to the level of the pavement

I'm apprehensive about the bus – I go at the quiet time

I have sprainedankle and arthritis of the spine and I find the steps to the bus difficult

It is too high getting on and off public transport

We need more seating at bus stops

Provide adequate seating in the new interchange



To Primary Care

Establish and monitor blood sugar levels

Help from the optician

There should be more attention to detail by the GP – explaining your medication and how it could affect you in regards to falls

When older people have their annual health check they should do a falls risk assessment and look at prevention rather than react when we do fall and we should use the GP as a link to other services

Have an assessment of falls to establish their risk

An assessment of your risk of falling

I had a home assessmentto get aids around the home when my wifebegan to suffer from dementia. Others should do the same

Seek advice from doctor

See the GP

OT support



To the CCG

A guide on what to do in case of fall would help.

At what point would the Falls team get involved if someone is having repeated falls. People who have had a number of falls want to know and if they should have been referred

Are there other aids other than Careline in case of a fall?



To Aids and Adaptations Services

Careline – alarm systems

Appropriateaids sited in the house

No wheelchair

Knowledge of availability of walkingaids

Equipment

In my husband's case the disability team have been out and assessedhim and given him adaptations to help him including a walking framethat has a seat

Adaptations in the home

Walking equipment

THANKS TO EVERYONE WHO PARTICIPATED IN THIS ENGAGEMENT ACTIVITY

Healthwatch Bolton/Bolton CVS November 2016