#### Proposed Decision to be made By Portfolio Holder for Health on or after 17 March 2017

### Public Health - Preventing a First Fall Fitter Futures - Move! Improve! Service Proposed consultation

#### Recommendation

That the Portfolio Holder for Health approves the proposed consultation to inform the Public Health Preventing a First Fall – Fitter Futures Move! Improve! proposed service to run from Thursday 1st June to Wednesday 26th July 2017.

#### 1.0 Background & rationale

- 1.1 The current Falls Prevention service, commissioned by WCC Public Health, is intervention and treatment focused and is for South Warwickshire residents who have already fallen or have had multiple falls. In response to findings from a recent health needs analysis and evidence review conducted by WCC Public Health, it is recommended that the service shifts to a countywide prevention focused service. The key desired outcomes for the proposed service will be to improve health in the Warwickshire adult population and reduce hospital admissions and the demand on other health and social care services. WCC Public Health with key stakeholders has agreed to redesign the service so that there is a clear shift to a service which aims to prevent the Warwickshire population from having a first fall.
- 1.2 WCC Public Health is working in collaboration with key health and social care stakeholders to ensure that this new service is fully integrated with existing and new falls pathways. The new service will also be an integral part of WCC Public Health's prevention strategy, the Making Every Contact Counts (MECC) revised offer (currently in progress) and existing county wide Fitter Futures Warwickshire services. The existing Fitter Futures Warwickshire services includes a Single Point of Access as well as1-1 and group physical activity programmes.
- 1.3 The proposed new service will consist of three elements:

#### **Generic service**

This service will be for all of the Warwickshire adult population, aged 16 and over. This population will self-refer or be referred to physical activity programmes in their own workplace or communities, including in residential

Care Homes. The service delivery will be ongoing programmes which incorporate fitness tests/MOT's, strength, balance, flexibility and endurance exercises and brief healthy lifestyle advice.

#### Specialist service

This service will be for the Warwickshire adult population aged 60 and over. It will be the development, management, facilitation, co-ordination and delivery of a specialist evidence based service which supports those who have a medical condition that puts them at risk of having a first fall. The service will offer Fitness tests/MOT's, physical activity opportunities to develop strength, balance, flexibility and endurance. It will offer healthy lifestyle advice which supports the Warwickshire population to make healthy lifestyle changes that will improve health and minimise the risk of having a first fall.

#### **Learning and Development**

This service will be the development, management, facilitation, co-ordination and delivery of specialist learning and development training programmes for various target audiences including frontline staff and managers, including non clinicians and clinicians. This will improve their knowledge, skills and competencies so that they can support the Warwickshire population who they are in contact with, to prevent them from having a first fall.

1.4 The current contracted service comes to an end on 31<sup>st</sup> March 2018. On 5<sup>th</sup> July 2016, the Head of Service authorised proceeding with an appropriate procurement process to enable the award of contract(s) for the provision of the Fitter Futures - Move! Improve! service with a contract start date of 1st April 2018.

#### 2.0 Proposed Consultation

- 2.1 This report seeks permission from the Portfolio Holder to consult with service users, Warwickshire residents and key stakeholders about the proposed new service. The consultation activities and feedback will inform the service design and questions which will be part of the tender evaluation process for Provider bidders as part of the procurement process. The consultation content and process will take account of the approved budget reductions agreed by Council on 2nd February 2017. All Public Health consultations are part of our strategic and operational commissioning approach and any associated costs are embedded into the Public Health budget.
- 2.2 The proposed 7 week consultation process will start on Thursday 1 June and finish on Wednesday 26 July 2017. The aim of this consultation activity is to gain the views of Warwickshire residents and key stakeholders about the delivery of the Public Health Fitter Futures Move! Improve! service specification and procurement of the new contract from 1<sup>st</sup> April 2018.
- 2.3 A range of engagement methods will be employed to maximise opportunities for service users and other key stakeholders to put forward their views, these include:

- Survey (both on line, 'Ask Warwickshire' and paper format),
- Focus groups and consultation events with Warwickshire residents, service users and key stakeholders.
- Public and partner roadshows across the county
- Social media and relevant press/newsletters
- 2.4 Where possible and appropriate, shared consultation activities will be held in conjunction with other Public Health commissioners who have similar time frames for consultation on service redesign. This approach will help to avoid over consulting and duplication of engagement with similar stakeholders as well as provide an opportunity for Public Health to promote and share information on a range of services to a wider audience.
- 2.5 The consultation will be structured to allow for wide ranging views on the proposed service specification and include the appropriate reach to all ages (16+), vulnerable groups and individuals, workplaces and communities. The potential use of the service by Warwickshire residents and key stakeholders will be measured. In conjunction with the consultation plan, marketing and communication plan is being developed to ensure that service users, Warwickshire residents and key stakeholders are kept informed throughout the consultation and post consultation evaluation period.
- 2.6 Public Health has completed an EQIA (Appendix A). The EQIA will be reviewed and updated as required as part of this consultation process and will be made publicly available with the final consultation report.

#### 3.0 Timescales associated with the decision and next steps

3.1 The table below sets out the critical milestones and timescales of the consultation process to ensure key deadlines are met to effectively tender and commission the Drug and Alcohol service.

Milestones	Deadline
Portfolio for Health consultation approval	17 <sup>th</sup> March 2017
Consultation period (8 weeks)	1 <sup>st</sup> June – 26 <sup>th</sup> July 2017
Collate & analyse responses, prepare draft consultation report	27 <sup>th</sup> July - 9 <sup>th</sup> August 2017
Seek cabinet approval of consultation report	7 <sup>th</sup> September 2017
Provide feedback to respondents by circulating final consultation report	18 <sup>th</sup> September 2017
Commence tender process	2nd October 2017

3.2 Providing feedback to respondents is a vital element of the consultation process and this will be undertaken by ensuring the final consultation report is made publicly available on 'Ask Warwickshire' and widely shared with all partners and stakeholders.

#### **Background Papers**

#### None

	Name	Contact Information
Report Author	Fran Poole	franpoole@warwickshire.gov.uk
		Tel: 01926 413781
Head of Service	John Linnane	johnlinnane@warwickshire.gov.uk
		Tel: 01926 413705
Strategic Director	Monica Fogarty	monicafogarty@warwickshire.gov.uk
		Tel: 01926 412514
Portfolio Holder	Cllr Les Caborn	cllrcaborn@warwickshire.gov.uk
		Tel: 01926 413712

The report was circulated to the following members prior to publication:

Local Member(s): None

Other: Councillor A.Webb, Holland, Perry, Caborn, Rolfe

EQUALITY IMPACT ASSESSMENT/ ANALYSIS (EqIA)	
Public Health Warwickshire Services Tender for Services for:	
Fig. 5.4. AND STARTED Character (Palance and Destroyal Ctability to Descript a First Fo	
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#### **Warwickshire County Council**

#### **Equality Impact Assessment/ Analysis (EqIA)**

Group	Communities
Business Units/Service Area	Public Health
Plan/ Strategy/ Policy/ Service being assessed	New countywide service which will be delivered as a result of a redesign of the current South Warwickshire Specialist falls prevention Service for people who have already fallen. This new service will shift the emphasis to the prevention of falls
Is this is a new or existing policy/service?  If existing policy/service please state date of last	To go out to tender for a new preventing a first fall service as an integral part of the existing Fitter Futures Warwickshire.
assessment	Tatares warmingsme.
EqIA Review team – List of members	Belinda Blake Fran Poole Kate Woolley
Date of this assessment	2/8/16
Signature of completing officer (to be signed after the EqIA has been completed)	Fran Poole
Are any of the outcomes from this assessment likely to result in complaints from existing services users and/ or members of the public?  If yes please flag this with your Head of Service and the Customer Relations Team as soon as possible.	NO
Name and signature of Head of Service (to be signed after the EqIA has been completed)	Dr John Linnane
Signature of GLT Equalities Champion (to be signed after the EqIA is completed and signed by the completing officer)	Phil Evans

A copy of this form including relevant data and information to be forwarded to the Group Equalities Champion and the Corporate Equalities & Diversity Team



Working for Warnickshire

## Form A1

# INITIAL SCREENING FOR STRATEGIES/POLICIES/FUNCTIONS FOR EQUALITIES RELEVANCE TO ELIMINATE DISCRIMINATION, PROMOTE EQUALITY AND FOSTER GOOD RELATIONS

Low or no relevance/ priority Medium relevance/priority High relevance/priority

**Note:** 1. Tick coloured boxes appropriately, and depending on degree of relevance to each of the equality strands

Business Unit/Services:				Rele	Relevance/Risk to Equalities	-dualities			
State the Function/Policy /Service/Strategy being assessed:	Gender	Race	Disability	Sexual Orientation	Religion/Belief	Age	Gender Reassignment	Pregnancy/ Maternity	Marriage/ Civil Partnership (only for staff)
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Postural Stability	>	>	>	>	>	>	>	>	>
programmes for those									
at risk of falling from									
age 50 onwards									
Strength and Balance	>	>	>	>	>	>	>	>	>
programmes for									
people aged 65 and									
older									
Are your proposals likely to impact on social inequalities e.g. child poverty for example or our most geographically disadvantaged communities? If yes please explain how. The World Health Organisation states that poverty, loneliness, social isolation and	to impact case explair	on social ined how. The M	ualities e.g. o	child poverty Organisation	for example or states that pov	our most ged erty, loneline	ographically dis ss, social isolat	advantaged tion and	YES
social exclusion are important social determinants and risk factors of ill health among older people. This new service aims to	ortant socia	l determinant	s and risk fac	ctors of ill hea	alth among olde	er people. The	nis new service	aims to	
support service users aged 50 and over to improve health and well-being by preventing falls which can lead to ill health, loneliness, social isolation and exclusion and to reduce the risk of disease in all priority groups	jed 50 and (	over to improvision and to re	ve nealtn and educe the ris	y well-being to	by preventing to in all priority or	alis wnich car ouds	n lead to III neal	th,	
Are your proposals likely to impact on a <b>carer</b> who looks after older people or people with disabilities? <b>If yes please explain how</b> . Carers as with any other resident living in Warwickshire are welcome and encouraged to access these programmes alone if they meet the criteria of being at risk of falling or are aged 50 or over or they can access the programmes with the person they care for.	r to impact or other resid	on a <b>carer</b> wh lent living in V isk of falling o	no looks after Varwickshire or are aged 50	older people are welcome 0 or over or the	or people with and encourag hey can access	disabilities? led to access the progran	ks after older people or people with disabilities? If yes please explain ckshire are welcome and encouraged to access these programmes alone aged 50 or over or they can access the programmes with the person they	explain Imes alone Ierson they	YES

(2) How does it fit with Warwickshire County	Our core purpose within the One Organisational plan is to:
Council's wider objectives?	-
	Develop and sustain a society that looks after its most vulnerable members, delivers
	appropriate, quality services at the right time, and seeks opportunities for economic
	growth and innovation.
	There are five key outcomes for this:
	Our communities and individuals are safe and protected from harm and are able
	to remain independent for longer.
	<ul> <li>The health and wellbeing of all in Warwickshire is protected.</li> </ul>
	<ul> <li>Our economy is vibrant; residents have access to jobs, training and skills</li> </ul>
	development.
	<ul> <li>Warwickshire's communities are supported by excellent communications and</li> </ul>
	transport infrastructure.
	<ul> <li>Resources and services are targeted effectively and efficiently whether delivered</li> </ul>
	by the local authority, commissioned, or in partnership.
	This project will assist people in remaining independent longer and that the health and
	wellbeing of all in Warwickshire is protected.
	To prevent a first fall in the population of Warwickshire who are at risk of falling whether
(3) What are the expected outcomes?	due to older age of through an underlying medical condition which makes them at
	greater risk of falling

(4)Which of the groups with protected characteristics is this intended to benefit? (see form A1 for list of protected groups)

In particular the following groups will benefit;

mprovement outcomes when delivered to all people over the age of 50 and for people 60 and over who have a risk of falling due to various factors which, as per the National Age: Using the evidence base, this new service has most impact on health nstitute of Clinical Excellence Guidance (NICE), include;

- cognitive impairment
- continence problems
- falls history, including causes and consequences (such as injury and fear of

footwear that is unsuitable or missing

- health problems that may increase their risk of falling
  - medication
- postural instability, mobility problems and/or balance problems
- syncope syndrome
- visual impairment

will be referred to the new service by a health or social care professional, a pharmacist, Service users aged 60+ with the above conditions and any other risk of falling factors a Warwickshire Wellbeing Hub or Connect Well staff member.

Service users aged 50 and over will be able to self-refer, or be referred (i.e. by an occupational Health department etc.), to exercise programmes which incorporate strength and balance.

referrer in the instance of accessing exercise and/or postural stability programmes. All programmes incorporating strength and balance exercises and all people age 60+ will people age 50+ with learning and/or physical disabilities will have access to exercise Disability: Some people with learning or physical disabilities may be at greater risk of falling. Each service user will have their own individual needs in terms of preventing falls. Some will be at greater risk of falling than others. This will be determined by a nave access to postural stability programmes. In all cases, carers will be able to access the programmes with the people they care for, and all other people with any of the protected characteristics who are over 50 and / or have a disability will also be able to access the service.

Stage 2 - Information Gathering	
	A wide range of evidence has been used including National Institute of Clinical
information have you used to help you make a	Excellence, the Warwickshire Joint Strategic Needs Assessment, the Warwickshire
judgement about the plan/ strategy/ service/	Health and Well Being Board Strategy, The Director of Public Health's Annual General
	Report, Government policy, systematic reviews of research programmes, strategic
	commissioning review of services commissioned currently.
(2) Have you consulted on the plan/ strategy/	We have consulted with the following;
service/policy and if so with whom?	the Director of Public Health,
	the WCC People Group,
	health professionals,
** · · · · · · · · · · · · · · · · · ·	service providers,
	Public Health Warwickshire Commissioning and Procurement Board.
	PHW core review team
	Service users already accessing the current falls service through customer satisfaction
	and feedback surveys,
	South Warwickshire Foundation Trust
	and WCC Social Care

(3) Which of the groups with protected characteristics have you consulted with?	The service users will be workplace e aged 50 or over and aged 60 or over them more at risk of having a fall. All characteristics who are over 50 and / service.  • Employees of Warwickshire Cohealth and wellbeing event in ewere interested in work physic with WCC occupational health they could refer employees to.	The service users will be workplace employees and Warwickshire residents who are aged 50 or over and aged 60 or over if they have a medical condition which makes them more at risk of having a fall. All other people with any of the protected characteristics who are over 50 and / or have a disability will also be able to access the service.  • Employees of Warwickshire County Council (WCC) were consulted with at a staff health and wellbeing event in early 2016 – signatures were taken from staff who were interested in work physical activities. The commissioner has also engaged with WCC occupational health and identified that they would welcome a service they could refer employees to.  • In July 2016, exercise providers were consulted with to identify whether or not	hire residents who are andition which makes the protected also be able to access the re consulted with at a staff were taken from staff who ssioner has also engaged would welcome a service identify whether or not
	<ul> <li>the service users they work with would bene exercises within their exercise programmes.</li> <li>The current falls service receives feedback basis – this feedback has been looked at an service. This feedback is from all people inc characteristics</li> </ul>	the service users they work with would benefit from strength and balance exercises within their exercise programmes. The current falls service receives feedback from service users on a quarterly basis – this feedback has been looked at and informed design of the new service. This feedback is from all people including those with protected characteristics	ength and balance e users on a quarterly design of the new e with protected
Stage 3 – Analysis of impact			
(1) From your data and consultations is there any adverse or negative impact identified for any particular group which could amount to discrimination?  If yes, identify the groups and how they are affected.	RACE	DISABILITY This is an all-inclusive service – however, it is not for people requiring intense specialist health professional support	GENDER

	MARRIAGE/CIVIL PARTNERSHIP	the service is specifically for everyone, including all priority groups, who are either at 50 and over and are at risk of falling and/or for people aged 65 and over	GENDER REASSIGNMENT
	KELIĞION/BELIEF	PREGNANCY MATERNITY	SEXUAL ORIENTATION
(2) If there is an adverse impact, can this be justified?	YES – there are other services available for those with disabilities who need specialist support and the evidence demonstrates that best practice, where the best possible health improvement outcomes can be achieved, is the provision of a preventing falls service which focuses on those aged 50 and over who are at risk of falling and those aged 60 and older	is available for those with disconstrates that best practices can be achieved, is the prose aged 50 and over who are	abilities who need specialist where the best possible vision of a preventing falls at risk of falling and those
(3)What actions are going to be taken to reduce or eliminate negative or adverse impact? (this should form part of your action plan under Stage 4.)	The commissioner will ensure through service specification that providers are equipped to deliver an all-inclusive service, to people aged 50 and over who are at risk of falling and to people aged 60 and older and seek solutions where specialist health professional input is required. The service will be for people age 50+ working in Warwickshire for the workplace element of the new service and for people age 60+ who are registered with a Warwickshire GP and have a medical condition which makes therm more at risk of having a first fall - both elements include all priority groups. People under age 50 can access Fitter Futures Warwickshire already – fitness instructors are being trained to implement strength, balance and postural stability exercise into all exercise programmes – this existing service is for young people age 12-15 and adults aged 16+. The new service will provide additional opportunities for those at risk (age 50+) of poorer bone health and losing strength, balance and postural stability because of growing older. All other people with any of the protected characteristics who are over 50 and / or have a disability will also be able to access the service.	The commissioner will ensure through service specification that providers are equipp to deliver an all-inclusive service, to people aged 50 and over who are at risk of falling and to people aged 60 and older and seek solutions where specialist health professional input is required. The service will be for people age 50+ working in Warwickshire for the workplace element of the new service and for people age 60+ ware registered with a Warwickshire GP and have a medical condition which makes the more at risk of having a first fall - both elements include all priority groups. People under age 50 can access Fitter Futures Warwickshire already – fitness instructors are being trained to implement strength, balance and postural stability exercise into all exercise programmes – this existing service is for young people age 12-15 and adults aged 16+. The new service will provide additional opportunities for those at risk (age 50+) of poorer bone health and losing strength, balance and postustability because of growing older. All other people with any of the protected characteristics who are over 50 and / or have a disability will also be able to access t service.	The commissioner will ensure through service specification that providers are equipped to deliver an all-inclusive service, to people aged 50 and over who are at risk of falling and to people aged 60 and older and seek solutions where specialist health professional input is required. The service will be for people age 50+ working in Warwickshire for the workplace element of the new service and for people age 60+ who are registered with a Warwickshire GP and have a medical condition which makes them more at risk of having a first fall - both elements include all priority groups. People under age 50 can access Fitter Futures Warwickshire already – fitness instructors are being trained to implement strength, balance and postural stability exercise into all exercise programmes – this existing service is for young people age 12-15 and adults aged 16+. The new service will provide additional opportunities for those at risk (age 50+) of poorer bone health and losing strength, balance and postural stability because of growing older. All other people with any of the protected characteristics who are over 50 and / or have a disability will also be able to access the service.

(4) How does the plan/strategy/service/policy contribute to promotion of equality? If not what can be done?	The services are all inclusive and will take account of accessibility in terms of where it is delivered, times of delivery and appropriateness venues to meet customer need.
(5) How does the plan/strategy/service/policy promote good relations between groups? If not what can be done?	N/A
(6) Are there any obvious barriers to accessing the service? If yes how can they be overcome?	Fitter Futures Warwickshire is already promoted through social media, events, attendance at meetings, flyers, posters, Health and social care professional newsletters, pharmacies, libraries, hospital departments, learning disability teams, mental health services, disability services and other healthy lifestyle services. This will all be continued.
	In addition, the new service will have its own MarComms plan developed so that marketing and promotion is aimed at the right audience and in the best way possible i.e. to residential homes, sheltered housing, older people's groups, workplaces, care homes, hospital consultants, rural hubs such as community centres, working men's clubs, council hubs
	The contract and service specification for the new service will expect that the provider/s meet the Standard Information Assessment requirements for people with learning or physical disabilities. The contract and service specifications will also require that the needs of people who live in rural locations, have English as a second language or any other personal needs are available to minimise the risk of any accessibility issues to the service. All other people with any of the protected characteristics who are over 50 and /
	or have a disability will also be able to access the service.
(7) What are the likely positive and negative consequences for health and wellbeing as a result of this plan/strategy/service/policy?	The service will have public health outcomes as performance measures to improve health through improving postural stability, strength and balance in order to prevent a first fall. The positive consequences will be people having improved stability and are less likely to have a first fall.

N/A	No – these services give health and social care professionals, pharmacists, Wellbeing Hub and Connect Well staff the opportunity to refer people to. This group of referrers and health professionals are already very well engaged with the existing falls prevention service and the Fitter Futures Warwickshire services in which this new service will be embedded. During the consultation exercise stakeholders including health see these services as mitigating access in their own right – the services will provide accessibility to interventions to improve health.	Yes – services will be targeted, promoted and delivered in areas where health inequalities are greatest as a priority. This is already being done and the impetus needs to be sustained.
(8) What actions are going to be taken to reduce or eliminate negative or adverse impact on population health? (This should form part of your action plan under Stage 4.)	(9) Will the plan/strategy/service/policy increase the number of people needing to access health services? If so, what steps can be put in place to mitigate this?	(10) Will the plan/strategy/service/policy reduce health inequalities? If so, how, what is the evidence?

If No Further Action is required then go to – Review & Monitoring

(1)Action Planning – Specify any changes or improvements which can be made to the service or policy to mitigate or eradicate negative or adverse impact on specific groups, including resource implications.

# EqlA Action Plan

Action	Lead Officer	Date for completion	Resource requirements	Comments

Please annotate your policy with the following statement:

'An Equality Impact Assessment/ Analysis on this policy was undertaken on (date of assessment) and will be reviewed on (date three years from the date it was assessed).