



Pennine Lancashire Care Home Engagement Project



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Background

In October 2023, a multi-agency collaborative project launched in care homes across Pennine Lancashire with the aim of reducing calls to North West Ambulance Service (NWAS) and reducing conveyance to Royal Blackburn Hospital by training care home staff to access the appropriate services for residents in their community.

The project consists of a two-hour training session with care home staff to inform them of the different services available, how they can help their residents and to use the services appropriately, ensuring that 999 is reserved for life-threatening emergencies.

The engagement session is delivered by a number of representatives from different services:

South Lancashire and Cumbria Integrated Care Board (ICB)

The role of any ICB is to join up health and care services, improve people's health and wellbeing, and make sure everyone has the same access to services and gets the same outcomes from treatment. South Lancashire and Cumbria ICB has played a key role in bringing together these services to successfully deliver this project, ensuring a coordinated approach to care across the region.

North West Ambulance Service (NWAS)

NWAS is one of the largest ambulance trusts in England. They provide emergency response, patient transport and NHS 111 services to over seven million people across a geographical area of approximately 5,400 square miles. Each year they respond to thousands of calls related to falls. To tackle call volumes and reduce hospital admissions, the East Lancashire sector team has led the project, with a hope to roll out similar support to all areas of the North West.

✉ For more information about the project, or to book a session at your care home email Caroline Hargreaves, Senior Paramedic Team Leader and Lead for Care Home Engagement and Falls across Pennine Lancashire:
caroline.hargreaves@nwas.nhs.uk.


Intermediate Care Allocation Team (ICAT)

ICAT provides a single point of access to health and social care professionals throughout East Lancashire, offering direct access to a range of intermediate care resources. The team consists of registered general nurses, social workers, occupational therapists, physiotherapists, co-ordinators and administrative staff. They can assess referrals, make a number of recommendations and mobilise the right services based on the individual's current presentation.

 To make a referral, call 01282 805989.

2-hour Urgent Community Response (UCR)

UCR is made up of teams of advanced clinicians in your community who can respond within two hours if someone's health or wellbeing suddenly deteriorates. This can avoid the need for ambulance conveyance to hospital and could result in an admission to the virtual ward. A collaboration between them and NWAS has resulted in a new pathway called 'Call before convey'. NWAS crews can now call the two-hour UCR team from all nursing and care homes in East Lancashire and Blackburn with Darwen for patients who meet the service criteria, prior to a decision to transport to hospital. Advanced nurses and therapists can carry out assessments, order tests, diagnose, prescribe and order equipment within two hours of referral. The UCR Team is available 24 hours a day, seven days a week.

 To make a referral, call 01282 805989.

Specialist Medicines Optimisation in Care Homes (SMOCH) Team

The SMOCH Team provides a pharmacist-led community-based service to nursing and residential homes. They support nursing and residential homes with medicine management issues and provide resources and training to help them comply with CQC requirements. The team will also review medications and advise staff and carers about the risks associated with some medications and increase in falls.

To contact the SMOCH Team, ask for a referral via ICAT.

Progress Lifeline (Falls lifting services)

Progress Lifeline provides a free, 24/7 'non-injury' falls lifting service to residents of care and nursing homes across Lancashire. A Progress responder typically arrives within one hour, with an average response time of just 25 minutes. The team is trained in injury assessment, treating minor injuries and moving and handling of people. If they suspect an injury or feel it's unsafe to lift they will call ICAT or NWAS for further assistance. A mobile lifting chair called a 'Raizer' is used to help the resident off the floor and can be used on immobile residents.

In the event a resident has a fall and there is no obvious injury call the Progress Lifeline alarm response centre on 01772 436783.



Care Home Nursing Team

The Care Home Nursing Team visits people in most areas within East Lancashire who are unable to access wound care services away from their care homes. They deliver expert wound care, including post-operative treatment, sinus and cavity packing, trauma care, suture and clip removal, and first-line dressings. Additionally, they assist with advance care planning and DNR arrangements for residents.

The service operates Monday – Sunday 8.30am – 5.00pm – including bank holidays.



Telephone: 01282 644075.

Out of hours contact the Integrated Community Team (district nurses) on: 01282 644460.



Training resources

Clinical Frailty Scale app



CFS (Clinical Frailty Scale) has been created to help healthcare professionals quickly identify frailty in people over the age of 65. It is a reliable predictor of outcomes in the urgent care context and is a useful decision support tool.

The CFS app works by responding with a simple yes or no to a series of nine questions, starting at the most severely frail end of the scale. The response to the question identifies the level of frailty and provides a recommendation about how to approach that patient's care and treatment with extra information to read as needed.

Scan the QR codes to download the Clinical Frailty Scale app.



Google Play Store



Apple Store

ISTUMBLE app



The ISTUMBLE app is a free post falls assessment tool designed for healthcare workers and carers of the elderly, working to prevent unnecessary ambulance call-outs for falls.

These accidents can be life-threatening for older patients but they can also be completely harmless, and knowing the difference between the two is critical. Through a series of questions, you can check over the elderly patient before the app determines whether the paramedics are needed or not.

Scan the QR codes below to download the ISTUMBLE app.



Google Play Store



Apple Store

Rapid Recap - What you need to know about falls

Falls and fall-related injuries can occur at any age, but older adults are more susceptible due to combined risk factors. Falls impact independence, quality of life, and increase health costs. Certain medications are a major, modifiable risk factor, especially when not regularly reviewed.

NICE guidance advises that older adults who have fallen or are at higher risk should have their medications reviewed as part of a risk assessment. This review should consider modifying or stopping falls risk increasing drugs when possible.

Common medications that can be a risk factor:

- Blood pressure and heart tablets (e.g. ramipril, losartan, isosorbide mononitrate) may cause hypotension and/or bradycardia.
- Diuretics (e.g. furosemide, bendroflumethiazide) can cause hypotension, electrolyte disturbances or urgency to get to the toilet which can cause falls.
- Opioid pain killers (e.g. morphine, oxycodone) may cause slowing of reactions, impaired balance, drowsiness or confusion.
- Antidepressants and antipsychotics (e.g. trazodone, citalopram, mirtazapine, risperidone) may cause orthostatic hypotension, slow reaction times, impair balance, dizziness, blurred vision, or impair sleep quality.
- Benzodiazepines and z-drugs (e.g. diazepam, zopiclone) may cause drowsiness, slow reactions and impaired balance.
- Some antiepileptics (e.g. gabapentin, phenytoin, carbamazepine) may cause sedation, slow reactions, excess levels can cause ataxia and unsteadiness.
- Drugs for urinary incontinence (e.g. oxybutynin, solifenacin) or sedating antihistamines (e.g. piriton, promethazine) may cause drowsiness, blurred vision or confusion.

Other medicines such as Proton Pump Inhibitors (PPI's) (drugs that reduce acid in the stomach), levothyroxine, or steroids can increase the risk of having a fracture if they fall.



Could a medication be contributing to the risk of falls?
Do I need to consider a medication review?



Project impact

A 91-year-old female resident with advanced dementia experienced a fall in her care home, resulting in a red, swollen thumb, though she showed no signs of pain according to the care home manager. After discussing the situation, it was agreed that an ambulance was unnecessary, and that an urgent care centre (UCC) would be more suitable and there was a prolonged estimated wait time for NWS services. Given her advanced dementia, avoiding a lengthy wait in the emergency department was in her best interest.

The care home lacked staff to escort the patient, and sending her alone could have caused distress. The manager was informed about the ICAT/Intensive Home Support Service (IHSS) and the support they could offer in similar situations. The ambulance was cancelled, and an IHSS-funded taxi was arranged. The UCC was notified, and the patient received the necessary treatment and was safely returned to the care home, avoiding a hospital admission.



Care home engagement session agenda:

- NWAS Overview: Call system introduction (ARP, call categories), service pressures, triage, and harm mitigation for patient safety.
- Clinical Frailty Scale: Importance and integration into resident profiles.
- I Stumble App: A tool for assessing injured or unwell residents—download and start using it.
- Care home nurse leads: Wound care basics, dressing options, and managing referrals.
- ICAT and 2-Hour UCR: Service overview, referral process, and expectations.
- Progress Housing: Services overview, razor chair demo, and access process.
- SMOCH Pathway: Specialist pharmacist support for medication reviews to reduce fall risks and referral steps.
- 'Call Before You Convey' and 'Never Say No' Campaign: New pathways and staff expectations.
- Green Bags: Essential medication and documentation checklist for hospital admissions.
- Champions and induction packs: Collaborating to create a "gold standard" induction pack for all care homes.

✉ To book a session at your care home email Caroline Hargreaves, Senior Paramedic Team Leader and Lead for Care Home Engagement and Falls across Pennine Lancashire: caroline.hargreaves@nwas.nhs.uk.

Join the care home sector coffee and chats

📅 When: Every second Wednesday of the month, 2pm - 3pm

📍 Where: MS Teams

The Intensive Home Support Service and ICAT invite all care sector homes to an informal meeting to discuss queries, concerns, and network with colleagues. Sessions often feature guest speakers to help communicate and engage between East Lancashire Hospitals NHS Trust, NWAS and the care sector.

✉ To receive the meeting link, contact:
Rachel Walton: rachel.walton@elht.nhs.uk
Laura Burnell: laura.burnell@elht.nhs.uk

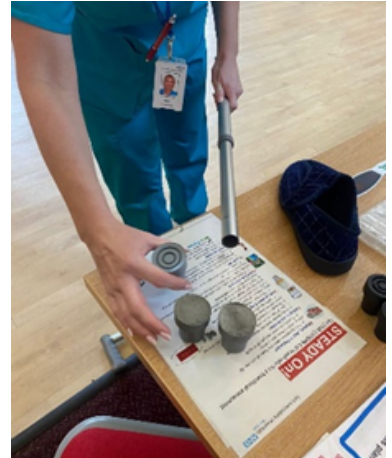


Other services

STEADY On

STEADY On is a non-clinical service who provide home assessments for anyone at risk of falling. It is an evidence-based approach founded on key fall factors:

- Slippers, feet and footwear
- Tablets and medication
- Environment and lighting
- Activity and exercise
- The question 'Do you fall?'
- EYesight and vision



To assess the service, self-referrals and referrals from health professionals are accepted by calling ICAT on 01282 805989.

If you would like to book an educational session for your care home, please call 01282 805989.

Age UK

Age UK is a charitable service working in the community to support older people, their families and carers. They offer a range of services including; information and advice, practical help and gardening, befriending and shopping services.



They also supply LifeBooks - a free booklet where you can write important and useful information about your life, from who insures your car to where you put the TV licence. If you know someone who would benefit from the Age UK LifeBook, call 0800 169 65 65 to obtain your copy.

For all other queries, call 0300 303 1234.

Alzheimer's Society

The Alzheimer's Society supports people with dementia and their carers through a helpline, dementia support workers, printed resources, and an online community. Call 0333 150 3456 for more information.



Diet

Let's talk about protein

Proteins are your body's main fuel for building muscle, strength, fighting infections and help you recover quicker from illness. Protein cannot be stored in the body so you need two-three portions of protein each day to provide what you need. Having not enough protein can speed up muscle loss and reduce mobility leading to increased risk of frailty.

Animal protein

- Meat
- Fish
- Poultry
- Eggs
- Seafood
- Dairy products



Plant protein

- Nuts and nut milks
- Seeds
- Beans
- Grains
- Quorn
- Tofu and soybean

How much should you eat?

Type of food	Portion size	What does this look like?
Cooked meat	90g	A deck of cards
Cooked white or oily fish	140g	Palm of your hand
Eggs	120g	Two medium eggs
Beans and pulses	150g	Four tablespoons
Soya, tofu and plant-based meat alternatives	100g	A bar of soap
Milk or fortified alternative	200ml (1/3 pint)	One glass
Yoghurt	125–130g	One pot or three tablespoons
Cheese	30g	Small matchbox



East Lancashire Hospitals
NHS Trust
A University Teaching Trust



**North West
Ambulance Service**
NHS Trust



**For further falls prevention tips, visit nwas.nhs.uk/falls
or scan the QR code with your smartphone.**

