

**HERTFORDSHIRE COUNTY COUNCIL**

**COMMUNITY SAFETY AND WASTE MANAGEMENT  
CABINET PANEL**

**TUESDAY 6 SEPTEMBER 2016**



**SAFE AND WELL VISITS**

*Report of the Director of Community Protection and Chief Fire Officer*

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Executive Member: Richard Thake, Executive Member for Community Safety and Waste Management

**1. Purpose of report**

- 1.1 To provide the Cabinet Panel with an update on a joint initiative between the Community Protection Directorate and Public Health that will see Community Protection staff deliver a 'wider public health' offer in the form of 'Safe and Well' visits to replace the current program of Home Fire Safety Visits.

**2. Summary**

- 2.1 Hertfordshire Fire Service undertake approximately 8000 home Fire Safety Visits per year. Primarily focused on reducing fires in the home these visits provide an ideal opportunity to engage with the most vulnerable in Hertfordshire and promote a healthy lifestyle.
- 2.2 The Community Protection Directorate has therefore developed a 'Safe and Well' programme which builds on the success of home Fire Safety Visits whilst incorporating a number of other welfare factors. These visits are designed to improve the health and wellbeing of elderly and at risk residents whilst also helping to reduce the number of falls victims and those accessing social care.

**3. Recommendation/s**

- 3.1 That Cabinet Panel support and endorse the collaborative working between the Community Protection Directorate and Public Health.

**4. Background**

- 4.1 Members will be aware of the significant and long standing prevention activity carried out by the Community Protection Directorate (CPD). This

takes the form of a wide variety of initiatives but core activity includes a programme of approximately 8,000 Home Fire Safety Visits (HFSVs) per annum. These visits are targeted at vulnerable households and those considered most likely to succumb to a fire.

- 4.2 HFSVs are undertaken by a range of staff including front line firefighters, specialist staff and Community Protection Volunteers.
- 4.3 More recently, as part of the wider collaboration agenda, discussions have taken place to determine whether Community Protection can deliver a wider Public Health offer as part of the programme of home visits. The result is that a 'Safe and Well' visit format has now been developed with Public Health colleagues to replace the HFSV, and is currently being piloted within Hertsmere.
- 4.4 This shift in emphasis has been driven by the sharing of good practice, through a variety of stakeholders including the Chief Fire Officers Association (CFOA) and Public Health England, and a realisation, following local research, which suggested that most of Hertfordshire's fire victims had one or more of the determinants of poor public health immediately prior to the fire. Using Coroner's reports a total of 60 deaths from 2000 to 2015 were analysed to determine more information about the lifestyle, circumstances, demographics and behaviour of the victims.
- 4.5 Those issues are now well documented and included:
  - Age
  - Mental Health (including dementia)
  - Frailty and falls
  - Social Isolation
  - Smoking
  - Alcohol / drugs
- 4.6 Furthermore risk of a fire death appeared to be significantly increased when any 3 of the above issues were combined.
- 4.7 A paper was taken to the Community Protection Strategic Leadership Group (SLG) in November 2015 which suggested that in order for the CPD to continue to improve on delivery of core business i.e. reducing fire deaths and injuries, there should be a refocusing of prevention activity on the 'cause of the cause,' i.e. the events and circumstances that may have contributed to the fire as well as the direct cause of the fire itself. SLG agreed to the strategy but recognised that health issues and risks varied across the County and, whatever the outcome, the end product needed to be co-designed with Public Health and HCS colleagues, based on both the local Joint Strategic Needs Assessment and a further review of fire deaths and injuries in Hertfordshire.
- 4.8 A joint Programme Management team is now well established between Public Health and Community Protection.

- 4.9 The Safe and Well visit is being built around the Making Every Contact Count for Older People framework (MECC) which is already established within Hertfordshire County Council and widely recognised as a concept.
- 4.10 The Safe and Well programme is intended to assist Herts County Council in promoting and supporting independent living. This enables individuals to carry on as normal without impacting heavily on Hertfordshire County Council services. The cost of putting people into care is expensive with residential care homes costing on average £29,300 per year while nursing homes cost on average £38,800 per year. Both these figures exceed the average income for pensioners with Local Authorities often picking up the cost of this care<sup>1</sup>
- 4.11 Falls and fractures in people aged 65 and over account for over 4 million hospital bed days each year in England alone. The healthcare cost associated with fragility fractures is estimated at £2 billion a year. Injurious falls, including 70,000 hip fractures annually, are the leading cause of accident-related mortality in older people.
- 4.12 After a fall, an older person has a 50 per cent probability of having their mobility seriously impaired and a 10 per cent probability of dying within a year. Falls destroy confidence, increase isolation and reduce independence, with around 1 in 10 older people who fall becoming afraid to leave their homes in case they fall again.
- 4.13 The Safe and Well programme aims to prevent falls in the elderly and vulnerable and so aid independent living and reduce admissions to residential and nursing care homes.

#### Safe and Well Visit Content

- 4.14 Following discussion with a large number of stakeholders we have agreed that the following themes will be incorporated into the pilot safe and well visits:
- Making sure homes are safe (to include fire safety, crime prevention and scams)
  - Making sure homes are warm
  - Preventing Feeling Alone
  - Preventing Falls (based on process developed by HVCCG)
  - Promoting Physical Activity – links to falls reduction
  - Ensuring Good Nutrition, and
  - Preventing Dehydration – both linking to falls prevention
- 4.15 In addition to the agreed themes, advice around smoking, alcohol and drugs, mental health, hoarding, bereavement and debt advice have also

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<sup>1</sup> The cost of care in later life – A report by the Centre for Economics and Business Research 2014

been suggested by stakeholders as key issues to offer advice and assistance with.

### Safe and Well Visit Entitlement

4.16 Final decisions have yet to be made on who is and who isn't entitled to a Safe and Well visit and for the pilot we are, at this time, continuing to provide a universal service. However it is likely that, after an initial sift, the following criteria will apply in the longer term:

- Low risk applicants will be provided with some advice and steered towards an on line self-assessment tool.
- Medium risk applicants will be able to book an appointment with fire crews.
- High risk individuals and those specifically referred by partner agencies will be visited by one of the 5 technicians (Hertfordshire Home Safety Service).

4.17 The Fire Service has access to what's known as Exeter data (this is data on all those over 65yrs of age) through a national data sharing protocol between CFA and NHS England. This data has been analysed and mapped against other data sets including:

- Aged 85+
- Previous fire or injury from fire
- Outside 10 minute attendance standard
- Victim of Scams
- HCS Referral

4.18 A risk rating is then applied based on the criteria and those deemed most at risk are to receive a safe and well visit

### Training for Staff

4.19 Training for CPD staff will initially adopt a 3 phase approach:

1. Setting the scene and brief intervention and principles of Make Every Contact Count training provided by Fire and Rescue and Public Health
2. Underpinning knowledge by way of iLearn packages on Safeguarding, MECC for older people, Nutrition and Hydration, Mental health / Dementia, Think Jessica, and Herts Police protect your home video.
3. A final session to go through the paperwork, referral process and confirm understanding.

## **5. Financial Implications**

- 5.1 There are no significant additional financial implications associated with the introduction of Safe and Well visits as the changes do not adversely affect the number of visits or require different staff to undertake the visits. The same groups assist as previously undertook the HFSV's.

## **6. Equality Impact Assessments (EqIAs)**

- 6.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equality implications of the decision that they are making.
- 6.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EQiA) produced by officers.
- 6.3 The Equality Act 2010 requires the County Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 6.4 A full EqIA has been undertaken for the pilot in Hertsmere and the key findings are:
- 2037, an increase of 79%.
  - The rate of increase in people over 85 is particularly pronounced as projections estimate an increase of 45% by 2025 (29,000 to 42,000).
  - Over 68,000 people in Hertfordshire have some degree of physical disability.
  - Around 26,000 people have a Learning Disability.
  - Over 11,600 people suffer from dementia.
  - Hertsmere has a slightly higher population of over 65 year olds than the county average and is the second most diverse district within the county – 67% of the County's Jewish population live within the

district and there is a growing Black African community. This will have a bearing on how and when staff undertake visits.

- 6.5 The Safe and Well Visits will use data to ensure that the most vulnerable are identified and offered the appropriate service irrespective of protected characteristics.