

Buckinghamshire County Council

Preventing demand and reducing costs from older adults who fall within the Buckinghamshire area

In brief:

- Buckinghamshire County Council (BCC) recognised that rising demand from older adults and budgetary constraints would put additional pressure across the wider Buckinghamshire public-sector service system and so initiated a system-wide discussion about demand management (DM) with senior system stakeholders, as well as members of the community and voluntary sector.
- A workshop was facilitated by Alexander in order for the stakeholders to gain a shared understanding of their common challenge of rising demand and how they might learn to act together systemically to prevent and manage it better.
- A project team was formed and led by Ian Smart through a structured programme of facilitated workshops using the principles of co-production. All practitioners worked together to: create a system view, map the end-to-end journey, gain customer insight and capture the total cost to serve. The team concluded that the focus of prevention strategies should be the 'hidden' group of older people that fell and didn't present, who were then responsible for the latent demand that would later present to the system.
- A key challenge was to capture each organisation's component cost to serve, and the team created a segmentation and cost model that showed that the whole system was configured to respond to a crisis and was a passive recipient of demand.
- Based on their discovery work and system evidence, the team developed ideas for change across the pathway, which were then grouped into structured options that provided a progressive approach that transitioned from a reactive model, reducing the number of secondary falls, through to a proactive model which focused on prevention of the primary fall using community-based exercise capacity.



Think with us ...

If you're reading this, then you're probably just like us, always curious about new ways of working.

The aim of our case studies is to promote sharing of knowledge and from it thought leadership. We hope this study helps you think through and explore some of the issues we now face.

Your questions and feedback are welcome.

Call us on 023 8022 5520 or email keira.howard@alexander-ecc.co.uk.

Rising demand, falling budgets

Buckinghamshire County Council (BCC) recognised that with rising demand, particularly from older adults, and continued downward budget pressures, the time was fast approaching when no matter how efficient the Council became it would still be unable to meet the rising demand arriving at its 'front door'.

Chris Williams, BCC's Chief Executive, also understood that this was not a problem unique to the Council. As a consequence he decided to grasp the 'system leadership' nettle and invite his peers from the wider public-sector service system within Buckinghamshire to an event about demand management. To help make this happen, Alexander volunteered time to facilitate the workshop with the aim being for the senior stakeholders to gain a shared understanding of their common challenge of rising demand and how they might learn to act together systemically to prevent and manage it better.

Acting together as a system

The system stakeholders, including Buckinghamshire Healthcare Trust, Aylesbury Vale and Chiltern CCGs, South Central Ambulance Service and Oxfordshire Health Services decided to work together on a demand management (DM) pilot project with the aim of reducing the number of older adults falling, the consequential system-wide costs and most importantly, provide better outcomes.

Significantly, all stakeholders agreed initially to suspend their wish to resolve the issue of shared investment and benefits so that the project would not flounder before it started – a common problem with system-wide projects where costs and benefits may fall unequally to different parts of the system. Doing what was right for citizens and the community became the compelling reason to act.

A Steering Group was formed under the leadership of Trevor Boyd, Strategic Director for Adults and Family Wellbeing at BCC, supported by Sara Turnbull, the Council's Programme Lead for DM. Ian Smart, Alexander's Assignment Director, led the project team up until the end of the first phase of the project which was to deliver an outline business case.

Practitioner-led co-discovery

It was important to the partners that the project was managed systematically using the principles of co-production and focused on the end-to-end falls 'system pathway' – how fallers flowed through and between organisations. The project team included practitioners from each stakeholder organisation across the pathway and from an active community and voluntary sector.

All practitioners were very engaged and worked well together through a structured programme of facilitated workshops to create a system view, map the end-to-end journey, gain customer insight and capture the total cost to serve. For all the practitioners this was the first time they had seen the complexity of the whole pathway and for some, the first time they understood what other services did, or what services were available.

The team discovered that of the 80,000 over 65 year olds in Buckinghamshire, a segment of 27,000 fell each year and of this segment, another group of 8,800 'presented' - were conveyed to hospital and entered the health and social care system. It was recognised that the 'hidden' group of 18,200 older people that fell and didn't present, were, in effect, the latent demand that would present to the system at a later date and should be a focus of prevention initiatives.



segmentation and cost model that showed some quite startling facts. The cost of responding to falls across the system pathway was conservatively calculated at £12.8m and would rise to £14.8m over the subsequent 2 years with rising demand from the ageing population. The numbers made real the demand management challenge most organisations talk about in notional terms. To compound the problem, only £250k was being spent on falls prevention – preventing the secondary fall in people who had fallen at least once before. The whole system was configured to respond to a crisis and was a passive recipient of demand.

So whatever the options for change might be, 'no change' wasn't one of them.

Co-production of the business case and options for change

Based on their discovery work and research evidence, the team developed ideas for change across the pathway that struck a balance between the need to improve response with the need to increase targeted prevention activity and capacity. Ideas for change included, amongst other things:

- Introduction of a 'Falls Car' – an ambulance-type vehicle staffed by an emergency response professional and a social worker who would triage the faller at the fall location to stop unnecessary conveyances to hospital and initiate reablement immediately.
- Short-term expansion of the existing falls prevention service - exercise strategy combined with multifactorial assessment.
- Medium-term development of a much larger community-based exercise capacity run by older people for older people based on the Cambridgeshire model.

The ideas for change were then grouped into structured options that provided a progressive approach that transitioned from a reactive model, reducing the number of secondary falls, through to a proactive model focused on prevention of the primary fall using community-based exercise capacity.

Following the development of an outline business case, the partners have now moved into the design and implementation planning phase which has shown them that they can act together with urgency towards shared and common goals.

Alexander is an independent change management consultancy that specialises in strategy alignment, performance management and improvement.

For further information please contact Keira on 023 8022 5520 or email keira.howard@alexander-ecc.co.uk.

The partners have proved how it is possible to work together as a 'system' to understand and begin to solve complex demand prevention and pathway problems. The falls pathway highlights how the acute-biased model of care is almost entirely reactive – the whole system is a passive recipient of demand. Falls is a microcosm of the challenges facing health and social care integration, where resources must be moved to community-based on models of social care and wellbeing. Nationally the new CCG's have shown an appetite to drive this type of change and I am hopeful that we might just be seeing the emergence of a new model of health and social care fit for a 21st century society.

Ian Smart
Director - Alexander



Alexander People - what we believe

Alexander people are business people who are passionate about public services. We take what's good from the private sector and shape it to meet the demands and challenges of public service. So when we look at the world and see what's wrong, our instinct is not to complain about it, it's to do something about it. This means that, when we look at our own company, we don't just look at its performance as a business; we look at the difference we make to changing public services and society for the better.

The people who manage and deliver public services today face huge challenges. They deserve someone to think with and people who can help to do the things they haven't the capacity to do themselves.

That's why we **engage** and connect with the people at all levels in public services who face these challenges.

Then we help them **challenge** the way things are.

So that they can deliver real **change** for the better.

That's what we do: **Engage. Challenge. Change.**

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Alexander People - what we do

Knowing where to go and how to get there

- Strategic & organisational review and diagnosis
- Shared vision
- Transformation strategy
- Transformation blueprint
- Stakeholder engagement
- Change readiness
- Communications

Delivering customer value with less resources

- Lean Systems Thinking
- Service transformation, design and improvement
- Shared services
- Function and service reviews
- Options appraisals and business case development

Enabling change to happen

- Programme and project management
- Change Management and benefits realisation
- Building capacity to change
- Skills and knowledge transfer

Making change sustainable

- Leadership development
- Management development
- Continuous improvement strategy and culture
- Skills and knowledge transfer

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- County Councils
- Housing Associations
- Police Services
- Health Services

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