



Keeping safe and avoiding crisis

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Enhance



Introduction

[Enhance](#) is funded by [Leeds Community Healthcare NHS Trust](#) (LCH) and managed by [Leeds Older People's Forum](#) on behalf of [Forum Central](#). Enhance brings together 13 third sector delivery partners with LCH teams across the city. Enhance provides person-centred, community-based support to individuals to help avoid delayed hospital discharges and readmissions, and to enhance capacity throughout the health system. This short thematic report draws on learning from the second year of Enhance delivery.

How does support to keep people safe improve health?

Enhance's support offer focuses on supporting people to remain independent and a key element of this is to ensure that people can keep safe at home. This aim fits well with LCH's overarching objectives to support self-management and to reduce avoidable hospital admissions, professional visits, dependency on medication and avoid patients moving into residential settings.

Ensuring people can get around safely can reduce falls risk – which is the main reported reason for unplanned hospital admission for older people and estimated to cost the NHS more than £2.3bn a year. Alongside this, the annual total cost of fragility fractures to the UK has been estimated at £4.4bn. Fall and fractures lead to loss of confidence, loss of independence, and increased likelihood of being admitted into institutional care¹.



¹ Data from Emergency Hospital Admissions for Falls, available [here](#): Health Innovation Yorkshire & Humber, 2019, available [here](#) (accessed 11.04.24).

What approach is being taken by Enhance?

Participants described how they were supported to keep their homes warm, in good repair, clean, and safe from falls or other hazards (such as fire) – achieved through direct support and advocacy, to onward referrals, and support to utilise technology.

The community support model came out strongly here. A key aspect of this was ‘keeping an eye” on people – initially this was through Enhance, though could extend beyond Enhance for those who were supported into activities offered through wider third sector community activities. Interviewees provided many examples of noticing potential issues through observing changes in behaviour and conversations and acting on these. Some examples include:

- Liaising with health professionals if someone had run out of medication unexpectedly and struggled to get an appointment,
- Prompting someone to take medication when they had forgotten to do so
- Identifying when someone did not seem themselves, and through checking finding that the wrong medication had been placed in a dosette box, and sorting this out,
- Spotting that someone was unsteady on their feet and referring to Telecare for a falls pendant,
- Noticing someone struggling to use a scooter and arranging for it to get fixed,
- Noticing someone with diabetes has sore feet and encouraging her to seek help from a GP.

Outcomes and impact for participants

The support offered through Enhance to keep people safe at home was valued by people who felt more confident that they could age safely in place, with less likelihood of needing crisis or institutional care. More importantly from a longevity point of view, participants were supported to take action to lessen the likelihood of something that occurred happening again so future crisis could be diverted. They felt reassured through finding out about, and being supported to access, tools and devices.

When asked what had helped them feel safer, participants provided a range of examples, such as being supported to declutter their home, set up a cleaner, sort out aids and adaptations and get outstanding repairs sorted out. Others referred to falls pendants, key safes and telecare advice and referrals or being shown how to set a medication alarm. Many of these actions had led to ongoing impact after Enhance support ended:

“[the Enhance worker] sorted everything out, she arranged a sensory person to assess me – and I got a talking clock for my sight – and a device to put on a cup when making tea – it beeps and means I have stopped scolding myself...I can only see light – the clock tells me the time – it says it – got a cane as well and stick through her as my legs have gone weak... the nurse comes every Thursday to change my partners’ chemical toilet but to be fair she is using it less now and pushing herself to use the normal toilet more now.”

The evaluation highlighted several examples of where Enhance support to keep someone safe had led to reduced risk of falls. For example one person, who frequently fell, was supported through referrals to Telecare for a pendant, for a key safe and to the local fire service who have developed a fire evacuation plan. Another example provided by a Frailty nurse was helping to get electricity switched on for someone when it had cut out. They felt this reduced falls risk as the person had been in darkness as they did not know who to turn to for help.

Regarding actions by delivery partners to 'keep an eye' on participants, interviewees reported how these had potentially diverted crisis. For example, one person had previously deteriorated quickly due to not taking prescribed medication – which led to an unplanned hospital visit. In other cases, it was felt that the likelihood of falls or having an accident had been reduced.

Impact and outcomes for LCH role and wider health and social care services

LCH staff provided examples of how tasks aimed at keeping patients safe saved their time. Supporting people to feel more confident around their safety was felt to reduce calls to Neighbourhood Team offices - as some would do this as their first port of call in a crisis.

For those who benefitted from support around aids and adaptations (such as referring into Telecare or Care & Repair) this was felt to save staff making a referral in the first place, though also saved time as it helped them gain easier access to a property (where key safes were fitted). Staff also reported feeling reassured where technology was accessed or where people received help to set up medication prompts or dosette boxes, as it meant people were better able to manage their own health and less likely to deteriorate due to forgetting to take something. Actions to help people keep clean also reduced the likelihood of patients requiring unplanned care, such as through ensuring a wound does not get infected.

Keeping people safe was also felt to prevent emergency hospital admissions, GP appointments, and calls to 111 and 999 – with examples provided of where this had been the case.

Further reading

Please visit the [resources section of the Leeds Older People's Forum website](#) to read more short thematic reports sharing learning from the evaluation of the second year of Enhance delivery, and to access the full range of Enhance reports and briefings.