



Mid and South Essex
Integrated Care
System



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Primary Care Falls Project

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Are elderly fallers the sole responsibility of the Ambulance Service?



Vision

1. Primary Care Paramedic notified of patient on the floor in the Community
2. Patient is assessed by Paramedic attached to the patient's surgery
3. If suitable, the patient will be moved off the floor (not possible if injured/ Hypotensive/ Critically ill)

Depending on the outcome of assessment:

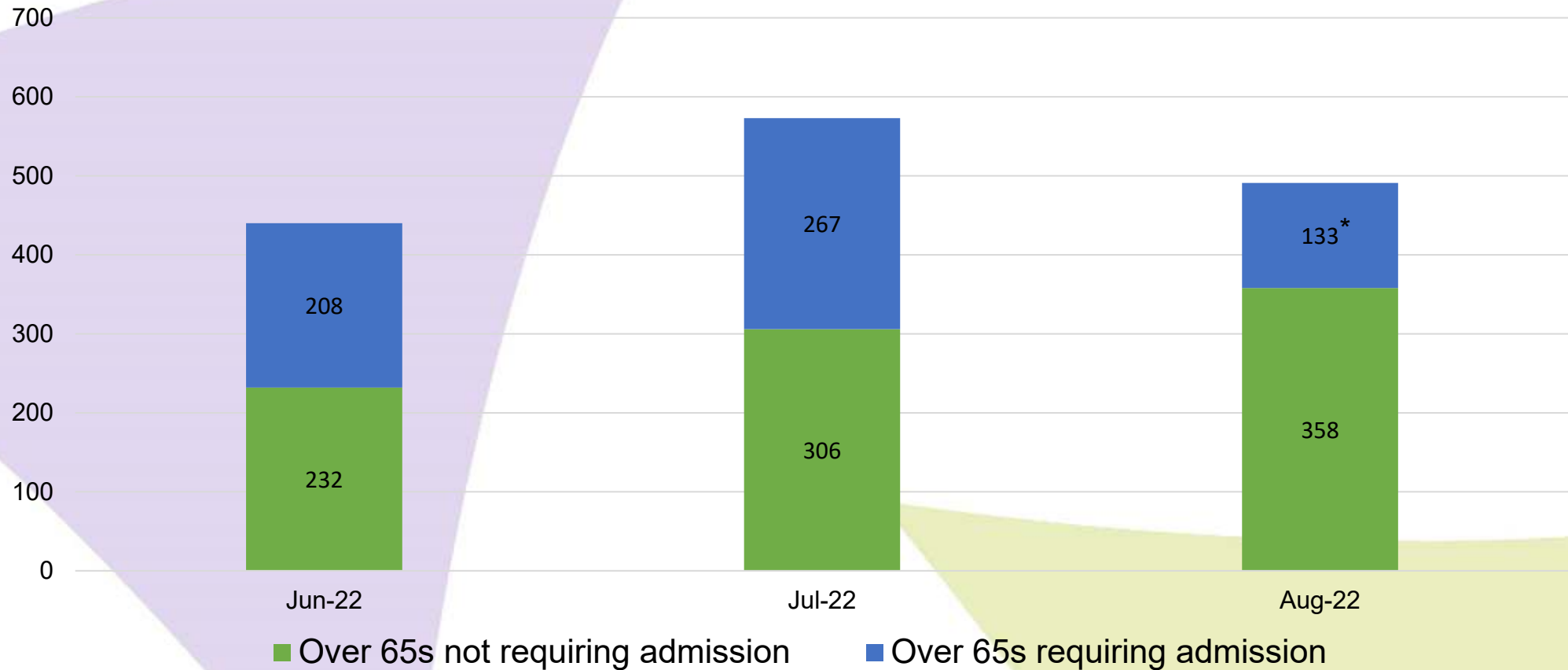
Ambulance cancelled and patient treated
in the Community via
GP/UCRT/DN/Virtual Ward/Frailty
Consultant

or

Ambulance Service updated of patients
condition – may result in call being
upgraded post assessment



ED attendances from falls in the over 65s



*Up to 19th August (data stopped due to AL). Data supplied by Harm Free Care Team, MSE



Benefits:

1. More patients treated in their homes
2. Reduced demand for the Ambulance Service
3. Patients off the floor faster
4. Fewer ED attendances
5. Reducing patient harm
6. Continuity of Care



Limitations :

1. Primary Care Paramedic availability – high daily patient workload
2. Patient Monitoring – typically Primary Care Paramedics have limited Monitoring i.e. ECG for collapse
3. GP's apprehensive
4. Low number of volunteers presently
5. Funding



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Thank you for listening!

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