



Population health management in action

by David Kemp.

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BLOG

David Kemp, Head of Community Safety at East Sussex Fire and Rescue Service, describes a great example of population health management in action on the south coast as the health and care sectors consider how to address health inequalities through integrated care and collaborative working.

In 2013 a fire, almost certainly caused by a discarded cigarette, resulted in the death of an elderly Sussex woman, Mrs A.

Once the fatal fire had been extinguished, investigators concluded that it had probably started in a pile of discarded cigarette butts next to Mrs A's favourite chair, which had subsequently caught fire itself.

Mrs A lived alone in a purpose-built flat owned by her local authority. She had been struggling to cope but the people who might have been able to help her didn't know this. Her housing officer and GP were not aware that her living conditions had deteriorated to the point that there were piles of discarded cigarette butts six inches high on the floor, and clutter and grime everywhere.

It is standard practice for East Sussex Fire & Rescue Service (ESFRS) staff to discuss all fatal incidents and look for factors that might have been missed that could have prevented the fires.

In the case of Mrs A, they found that she was not known to ESFRS before the fire and so had not benefited from a free home safety visit, when trained staff could have provided guidance and referred her to other agencies to help her to carry on living independently and safely.

In 2011/12 there were 10 fatal domestic fires in East Sussex. ESFRS analysed these cases in search of any common factors. The only one they found was a link to adult social care teams in the two upper-tier local authorities in their patch, East Sussex County Council and Brighton & Hove City Council. The 10 were among the 24,000 people who had made contact, either for one-off advice or more in-depth support.

Around 18,000 of these contacts were made with East Sussex adult social care teams, so ESFRS asked the council to share contacts' data so that they could follow up with letters offering visits to provide fire safety advice. But the residents at most risk – those living alone with underlying health conditions, limited mobility and meagre resources – were also the least likely to respond to these letters.

Adult social care managers worked with ESFRS on an agreement to share residents' data between agencies without consent, but this was seen as a step too far by the local authority's information governors, who declined to support the agreement.

The turning point came in 2014, when ESFRS's head of community safety met the principal policy officer of the Information Commissioner's Office at a conference in London, aptly named Dying for data.



After hearing about ESFRS's initiative, the policy officer worked with the county council's information governance officers to draft an information sharing agreement that enabled the sharing of contact details without consent between the two agencies. This enabled the fire and rescue service to make direct contact with high-risk people and offer them home safety visits. The vast majority agreed.

This data sharing agreement has been transformational. East Sussex has the fastest growing population of over-65s in the country, yet over the past four years there hasn't been a single fatal fire involving this older population group.

Understanding that the people most likely to know those at-risk better than anyone was GPs, in 2017 ESFRS's head of community safety asked to attend a practice managers' meeting at the general practice where Mrs A had been a patient.

At this meeting, the ESFRS safety officer showed photographs of Mrs A's living conditions, which shocked practice doctors. He suggested that the practice share details of its most vulnerable patients so EFSRS could arrange home safety visits and, with the resident's permission, report any concerns back to the practice. So began the first collaborative data sharing agreement between EFSRS and a GP practice. Since then, five more have been agreed across East Sussex, and two in Brighton & Hove.

These agreements mean that protecting the people who are most vulnerable to fatal domestic fires no longer relies on overstretched GPs referring them to ESFRS. Information sharing becomes a simple administrative process rather than a relatively complex transactional one.

Although the focus of ESFRS home safety visits is on finding and reducing fire risks, staff also offer advice on a range of other issues including frailty, trip hazards, cold, damp homes, fuel poverty, vulnerability to scams and other crimes.

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