Avoiding trips to hospital

Falls Prevention and Management Services in Camden

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Introduction to Camden: Demography

- Population 217,100 [1]
- Young population: 10% aged 65+, 23% aged 20-29 years
- Population increasing: births > deaths
- Mobile population: high proportion moving address each year
- BME: 40% of pop from Black and Minority Ethnic (BME) groups
- Largest BME groups: Bangladeshi (6.4%), Black African (6%) and Irish (4.6%).

Introduction to Camden:
average life expectancy

- Average life expectancy in men is slightly lower than the England Average. Camden women have a similar life expectancy compared with England as a whole.

<table>
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<tr>
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<th>Average Life Expectancy in Camden, 2002-2004</th>
<th>Average Life Expectancy in England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Males</td>
<td>75.5</td>
<td>76.6</td>
</tr>
<tr>
<td>Females</td>
<td>81.1</td>
<td>80.9</td>
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</table>
• There are approximately 1,400 deaths a year. Most common causes of death are cancer (25%), CHD (19%) and respiratory disorders (11%)[1].
• It is projected that by 2021 Camden’s population will rise to 260,800[2].
• A growing bulge in numbers aged 60 and over is anticipated by 2021[3].
Camden shows signs of a north south divide in relation to mortality ratios. Higher SMR in southern part of the borough, with exception of outliers in Kilburn and West Hampstead wards in the north[4].

Why is falls prevention important?

- A fall is a sudden unintentional change in position causing one to land on a lower level[1].
- **Why is falls prevention important?**
- By reducing falls in the elderly we can reduce hospital bed day costs, retain older people’s quality of life and enable them to live independently in the community for longer. Falls can have major impacts to the individual and to the health economy.
- **Impacts to the individual:** **Physical** (e.g. fractured neck of femur[2]), **psychological** (e.g. loss of confidence[3]) and **financial** (contribution to care home costs) impacts.
- **Impacts to the health economy:** Huge **financial** impacts. In 1999 in the UK, there were 647,721 attendances at Accident and Emergency and 204,424 hospital admissions due to fall related injuries in those aged 60 years or over. This equates to a cost of £908.9 million to the NHS and Social Services[4].
Evidence of best practice: NICE

• Positive effect is achieved when a multifactorial approach is taken
• NICE Guidelines recommend:
  – Case risk identification,
  – provision of interventions to prevent falls,
  – recurrent fallers provided with multifactor interventions (strength & balance training,
  – home hazard assessment,
  – vision assessment and medication review/withdrawal
Evidence of best practice: Cochrane review

- A Cochrane review in 2006 stated the following interventions are likely to be beneficial:
  - Tai Chi group exercise
  - Home hazard assessment and modification
  - Withdrawal of psychotropic medication
  - Multidisciplinary, multi factorial, health/environmental risk screening/intervention programmes in the community and in residential care facilities
  - An individualised programme of muscle strengthening and balance re-training
Policy drivers?

- ‘Saving Lives: Our Healthier Nation’[1] and
- ‘National Service Framework for Older People’[2] require the NHS, with their partners, to take action to prevent falls and reduce sequential fractures or other injuries in older people. All Primary Care Trusts (PCTs) are expected to have specialist falls services in place.

Camden falls services

- Range of Falls Services Provided in Camden:
  - `Clinical assessment and rehabilitation: Multidisciplinary falls screen developed and falls care pathway and specialised exercise programmes delivered.
  - Health promotion: Presentations and information stalls in libraries and other community settings. Sloppy Slipper Exchanges
Camden falls services cont.

- Health education: *Staff and user education sessions in day centres, residential homes, community centres.*
- Social marketing: *Posters, leaflets and self assessment forms widely disseminated.*
- Policy and practice development: *Falls prevention guidelines for residential homes.*
- Falls registers in care homes: *Registers developed to monitor frequency, location, time and outcome of a fall.*
Evaluation of fall services

• In September 2006, Camden PCT Commissioning Executive requested an evaluation of its falls services. The evaluation found:
  – In the absence of health promotion theoretical frameworks in service design, impacts on behaviour change were difficult to determine.
  – An audit was completed to assess the service compliance of NICE guidelines. The audit found Camden Falls Services meet NICE guidelines.
  – A Cost Benefit Analysis found falls services may have contributed towards a reduction of London Ambulance Service (LAS) fall related call-outs in the over 65s by 13% in two years. Locally this reduction in the number of falls equates to a saving to the health care system of £312,722
Number of fallers in Camden

Table 1: Total number of fallers over the age of 65 attended by LAS in Camden (LAS, 2006)

Table 2: Fallers (age 65+) conveyed to hospital by LAS

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<thead>
<tr>
<th></th>
<th>2003-04</th>
<th>2004-05</th>
<th>2005-06</th>
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<tbody>
<tr>
<td>Conveyed</td>
<td>1041</td>
<td>1013</td>
<td>873</td>
</tr>
<tr>
<td>Total Falls</td>
<td>1500</td>
<td>1485</td>
<td>1291</td>
</tr>
<tr>
<td>% Conveyed</td>
<td>69.4</td>
<td>68.2</td>
<td>67.6</td>
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Recommendations

- Ongoing monitoring of falls services required to measure impacts on behaviour change and reducing hospital admissions.
- Greater engagement from the local Health Promotion Service required to advise on the design of all future falls health promotion programmes in measuring impact on behaviour change.
- To ensure older people’s needs are encompassed in forthcoming Camden Joint Strategic Needs Assessment Plan.