

Falls and Bone Health Joint Strategic Needs Assessment (JSNA)

Health and Wellbeing Board

Date: 7 May 2014

Author:	Acting Director of Public Health
Wards:	All
Locality Affected:	All
Parishes Affected:	All

1. Purpose and Reasons

- 1.1 The aim of this report is to inform the Health and Wellbeing Board of the findings of the Falls and Bone Health Joint Strategic Needs Assessment (JSNA), seek support for its recommendations, and raise awareness of the need for falls prevention work in Swindon.
- 1.2 Falls and fall-related injuries are a common and serious problem for older people. Each year 30% of over-65s experience one or more falls. About 50% of people aged over 80 fall each year. A fall can result in distress, pain, injury, loss of confidence, loss of independence, the need to move to residential care, and in some cases can be fatal.
- 1.3 The Falls and Bone Health JSNA uses available local and national data to provide an objective analysis of the current picture regarding falls and bone health in Swindon including the number of people who fall; the services available to support them; prevention initiatives in Swindon; and gaps in service and areas for improvement. The findings from the JSNA inform a suite of recommendations that aim to prevent falls in older people, promote good bone health, and improve outcomes for people who do fall.

2. Recommendations

- 2.1 Note the recommendations from the Falls and Bone Health JSNA Bulletin (appendix one).
- 2.2 Support the establishment of a Clinical Commissioning Group (CCG) led task and finish group to develop an action plan for the implementation of the recommendations.

3. Detail

- 3.1 Falls and fall-related injuries are a common and serious problem for older people. Each year 30% of over-65s experience one or more falls. About 50% of people aged over 80 fall each year. Between 10 and 25% of such fallers will sustain a serious injury.
- 3.2 Falls and bone health is a national government priority; the Public Health Outcomes Framework includes national indicators for injuries due to falls in

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people aged 65 and over and the NHS Outcomes Framework includes indicators about the proportion of fragility fracture patients recovering to their previous levels of mobility/walking ability. There are also links between falls prevention and the Adult Social Care Outcomes Framework.

- 3.3 A fall can result in distress, pain, injury, loss of confidence, loss of independence, the need to move to residential care, and in some cases can be fatal.
- 3.4 Those with osteoporosis (bone weakness) are at particularly high risk of bone fracture as a result of a fall.
- 3.5 Most falls occur in the home; however incidence rates for falls in nursing homes and hospitals are two to three times greater than in the community and complication rates are also considerably higher.
- 3.6 Falls are not an inevitable consequence of old age. Falls should be considered a symptom rather than a diagnosis, so that when someone is known to fall frequently or be at risk of falls, effort should be made to find the cause or causes.
- 3.7 Complete prevention of falls among older people would be impossible and undesirable to achieve because of the restriction that would have to be placed on an individual's activity and autonomy. An acceptable balance between prevention and living with risk is needed.
- 3.8 In Swindon which has around 30,000 people aged over 65 it can be estimated that:
 - 10,000 will fall each year
 - 4,000 will fall twice or more
 - 1,500 will call the ambulance service
 - 1,500 fallers will attend an accident and emergency (A&E) department or minor injuries unit (MIU)
 - 730 will sustain a fracture
 - 180 will sustain a fracture to the hip
 - 90 will no longer be able to live independently as a result of their hip fracture
 - 45 will be admitted to a care home
 - 6,600 people per year who fall would benefit from a falls assessment

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- 3,300 will require a brief screening of gait and balance.
- 3.9 Falls are estimated to cost £5m to health and social care in Swindon each year.
- 3.10 The Department of Health and NICE have published guidelines for the assessment and prevention of falls in older people. Recommendations include:
- Case/risk identification - older people in contact with healthcare professionals should be asked routinely whether they have fallen in the past year.
 - Multifactorial falls risk assessment - older people who present for medical attention because of a fall, or report recurrent falls in the past year, should be offered a multifactorial falls risk assessment.
 - Responding to a first fracture and preventing the second through diagnosis and treatment of osteoporosis,
 - Early intervention in those who fall to restore independence through falls care pathways;
 - Multifactorial interventions - all older people with recurrent falls or assessed as being at increased risk of falling should be considered for an individualised multifactorial intervention that includes strength and balance training, home hazard assessment and intervention, vision assessment and referral, medication review with modification/withdrawal
 - Preventing falls through encouraging physical activity and healthy lifestyle, and reducing environmental hazards which might result in a fall.
- 3.11 In Swindon there is a range of services and interventions available to help prevent falls in older people, and support those who seek support after a fall. However, a large number of older people who fall do not contact a health service and so do not come in contact with these services.
- 3.12 There are some identified gaps in service provision and there is a need to co-ordinate referrals and care between different services. This could be achieved through the development of a falls pathway for Swindon.
- 3.13 More could also be done around primary prevention of falls and of osteoporosis. This should be targeted particularly at the “younger old” and have a focus on promoting healthy ageing including physical activity and other healthier lifestyle choices and raising awareness of the risk and protective factors for falls and osteoporosis.
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- 3.14 A set of key recommendations have come out of the JSNA process that aim to prevent falls in older people, promote good bone health, and improve outcomes for people who do fall. These are:
- 3.14.1 Review currently commissioned services that contribute to falls prevention, and care and support of those who fall, and explore opportunities for joined-up multi-agency approaches to commissioning to ensure that there is a clear evidence based falls and fracture care pathway in Swindon.
 - 3.14.2 Develop resources and training for health and social care professionals and the community and volunteers which promote falls and osteoporosis awareness; the importance of case risk assessment and case identification; and existing falls services available in Swindon and appropriate referrals to these services
 - 3.14.3 Explore ways to increase capacity to undertake multifactorial falls risk assessment within health care services in Swindon. This may be through the existing community falls service or within Primary Care.
 - 3.14.4 Improve referral pathways in to community falls clinic for repeat fallers attended to by the ambulance service or Homeline including redesign of current risk assessment forms used.
 - 3.14.5 Identify ways to extend local provision of evidence based strength and balance training through group classes and home based interventions including building links with nursing and residential care, Primary Care, Health Ambassadors and the new Community Navigators project.
 - 3.14.6 Support national campaigns and deliver local campaigns to promote healthy ageing including physical activity and other healthier lifestyle choices and other protective factors for falls and osteoporosis; advises older people and carers on what they should do in the event of a fall or fragility fracture; advises older people and carers about risk factors for falls and fractures and the steps they can take to reduce their risk.
- 3.15 The Falls and Bone Health JSNA Bulletin is an abbreviated version of the JSNA Falls and Bone Health Profile 2014. The full Profile provides more information on the issues covered by this bulletin, and includes a full set of references and acknowledgement of contributors. It can be found on Swindon's JSNA website <http://www.swindon.gov.uk/sc/sc-healthmedicaladvice/jsna/Pages/sc-jsna.aspx>

4. Alternative Options

- 4.1 Not to support the recommendations identified in the JSNA.
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5. Implications

Financial and Procurement Implications

- 5.1 There are no financial or procurement implications arising from the recommendations of this report.
- 5.2 If additional resources are needed to implement these recommendations a detailed business case will be developed.

Legal and Human Rights Implications

- 5.3 Legal and Human rights have been taken fully into account in compiling this report. It is considered that the recommendations within this report are compatible with Convention Rights.
- 5.4 In consideration of any future guidance and an understanding of best practice from elsewhere, the council will work with the NHS and other partners in order to ensure that equalities and a respect for human rights are at the heart of the development of the Swindon JSNA and that everyone in Swindon has fair access to services and are free from discrimination.

All other Implications

- 5.5 The Falls and Bone Health JSNA highlights a number of key areas of focus that will prevent falls in older people, promote good bone health, and improve outcomes for people who do fall.

Links to One Swindon, Strategic Objectives, Plans and Policies

- 5.6 Preventing falls and promoting bone health links directly to the Swindon's strategic priority to find new ways to reduce vulnerability and improve health for all.
- 5.7 There are strong links to Swindon's Health and Wellbeing Strategy; supporting adults to live healthier and more independent lives, and improving health outcomes for disadvantaged and vulnerable communities

Diversity Impact Assessment

- 5.8 A Diversity Impact Assessment has not been completed at this stage.
- 5.9 The Falls and Bone Health JSNA considers the needs of those who fall and those who are at risk of falling. Any future actions or service redesign will reflect the needs and diversity of Swindon communities.

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Risk Management

5.10 No specific risks identified at this stage for this report

6. Consultees

6.1 The Board Director Finance, Revenues, Benefits and Property (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

7.1 None

8. Appendices

8.1 Appendix 1: Swindon Joint Strategic Needs Assessment (JSNA) Falls and Bone Health Bulletin