



**Long term impact and Social Return –
FOR CONSIDERATION**

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Further work on this combined with MAWWFRS and NWFRS evaluations would create a social return for S&W across Wales and meet our All Wales Strategic Objectives.

“When an older person falls, it can have devastating consequences. Multiplied across the population, it’s a major public health issue.

A third of people over 65, and half of people over 80, fall at least once a year. Falls are the most common cause of death from injury in the over 65s and cost the NHS over £2bn a year and over 4 million bed days. Nearly 9 million, or one in six people in the population in England was 65 or over at the time of the last census, and the figure is forecast to rise by another 2 million by 2021.”

<https://publichealthmatters.blog.gov.uk/2014/07/17/the-human-cost-of-falls/>

“Falls and fall-related injuries are a common and serious problem for older people. People aged 65 and older have the highest risk of falling, with 30% of people older than 65 and 50% of people older than 80 falling at least once a year. The human cost of falling includes distress, pain, injury, loss of confidence, loss of independence and mortality. Falling also affects the family members and carers of people who fall. Falls are estimated to cost the NHS more than £2.3 billion per year. Therefore falling has an impact on quality of life, health and healthcare costs. (NICE Guidance, 2013)”

<https://www.publichealthnetwork.cymru/en/people/life-stages/older-people/falls-pre/>

“Falls are costly for the individual, the NHS, and the care and support system. Falls cost the NHS and social care an estimated £6m per day or £2.3bn per year.⁵ However, this figure represents the cost associated with hip fractures alone. It does not take into account other costs associated with falls that do not result in hip fracture but that may still require treatment or care. There is growing evidence to show that investing in falls prevention services is cost-effective. The Department of Health currently estimates that if every strategic health authority in England invested £2m in falls and bone health early intervention services they could each save £5m (net £3m) each year through reduced NHS costs, such as 400 fewer hip fractures.⁶ In fact, the cost of falls has an impact across the health and social care system. For instance, many people in later life who fall require the help of the ambulance service. Annually, ambulance services respond to 700,000 calls from older people who have fallen, which accounts for 10 per cent of total calls. Around 25 per cent of these do not need to go to hospital.⁷ Falls cost £115 per ambulance call-out.⁸ While statistics from A&E departments and hospitals are made publicly available there is very little information gathered about costs incurred by community services, GP consultations or nursing home costs, all of which are likely to be substantial. Fractures sustained as a result of falling are rising. The number of fractures exceeds the number of people suffering strokes and heart attacks, both of which are priority areas for the NHS. If we are to reduce fractures, we need to follow the example of these other disease areas and prioritise falls prevention services. In order to help older people to stay active, prevention services must be available to all those at risk of falling.”

Prudent Healthcare Falls Prevention Programme

The 1000 Lives Improvement Falls Prevention programme for Older People aims to help older people to maintain their health and wellbeing, live longer in their own homes and remain active in their communities.

Overview

Falls prevention is a key issue in the improvement of health and wellbeing amongst older people as falls are a major cause of disability and death in older people in Wales. It is estimated that between 230,000 and 460,000 people over the age of 60yrs of age fall in Wales each year. Too often these falls blight the lives of older people, resulting in serious injury which can lead to loss of confidence, loneliness and isolation.”

<http://www.1000livesplus.wales.nhs.uk/falls>

Costs of project per household should also be compared to the social cost of:

- An accidental dwelling fire
- A Burglary
- A Carbon Monoxide Incident in Dwelling
- The impact of smoking/smokers on the NHS

Costs of the additional Work Streams when added to the Home Safety Visit model.

Costs not included:

- Salaries of project team – included in Home Safety Visit Support.
- Vehicle costs – included in Home Safety Visit.
- Vehicle Derv – included in Home Safety Visit.
- Vehicle costs – included in Home Safety Visit.
- Training sessions for WT – included in Home Safety Visit training and awareness.
- Training sessions for On Call – included in Home Safety Visit training and awareness.
- System Update costs – included in Home Safety Visit Support.
- Postcards collation and issue – included in Home Safety Visit Support.

Costs Included:

- Leaflet costs – £4926.58
- Salary of trainer – £5738.04
- QA's - £43.47 carried out by HS Practitioner

Total spend = £10708.09 for 1050 visits

This equates to £10.20 per visit.