NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

**NICE INDICATOR DEVELOPMENT PROGRAMME**

**Resource impact statement: NM188**

**Date:** August 2019

# Indicator

NM188: The percentage of patients (aged 65 years and over) with moderate or severe frailty who have been asked whether they have had a fall, about the total number of falls and about the type of falls, in the last 12 months, were found to be at risk and have been provided with advice and guidance with regard to falls prevention (in the last 12 months).

# Introduction

Falls in older people are a costly and often preventable health issue. Reducing falls and associated injuries is important for maintaining health and wellbeing amongst older people ([Public Health England 2018 Falls: applying all our health](https://www.gov.uk/government/publications/falls-applying-all-our-health/falls-applying-all-our-health)). Falling has an impact on quality of life, health and healthcare costs. People 65 years and over have the highest risk of falling. A history of falls in the past year is a risk factor for falls and is a predictor of further falls. This indicator is intended to identify and minimise risks relating to falls.

# Resource impact

There are around 55.6 million people in England ([Office for National Statistics, 2017](https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland)) and around 10 million aged 65 years and over. It is estimated that approximately 15% of those aged 65 years and over will be categorised as being moderately or severely frail ([Clegg et al, 2016](https://www.ncbi.nlm.nih.gov/pubmed/26944937)). Piloting of the indicator in 26 general practices found 11% of people with moderate or severe frailty were found to be at risk in line with the proposed indicator (National Institute of Health and Care Excellence, 2019). This is equivalent to around 30 people per 10,000 people.

Current practice is variable. It is anticipated that some activity in line with the proposed indicator already takes place. An illustrative example shows that a 10% increase in use of the proposed indicator is estimated to cost around £80 per 10,000 population, as shown in table 1.

**Table 1 Illustrative example showing estimated annual cost of providing advice and guidance to 10% of the eligible people**



This assumes people receive an 9 minute consultation offering advice and guidance from a GP ([PSSRU, 2018](https://kar.kent.ac.uk/70995/1/Unit%20Costs%202018%20-%20FINAL%20with%20bookmarks%20and%20covers%20%282%29.pdf)).

Service delivery in GP practices is subject to local variation. Costs will differ when healthcare professionals other than GPs provide advice and guidance such as a practice nurse or another healthcare professional.

There may be subsequent savings from falls avoided.