

Multiple long-term conditions: asking about falls

NICE indicator

Published: 31 July 2019

Last updated: 29 April 2025

www.nice.org.uk/indicators/ind208

Indicator

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.

Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

Rationale

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. 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 last year is a risk factor for falls and is a predictor of further falls. Other criteria include living with frailty, being injured in a fall and needing medical (including surgical) treatment, having experienced a loss of consciousness relating to a fall and having been unable to get up independently after a fall. This indicator is intended to identify people living with frailty who have fallen and who need comprehensive falls assessment and comprehensive falls management.

Source guidance

Falls: assessment and prevention in older people and in people 50 and over at higher risk. NICE guideline NG249 (2025), recommendations 1.1.2

Specification

Numerator: The number of patients in the denominator 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.

Denominator: The number of patients (aged 65 years and over) with moderate or severe frailty.

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions: None.

Personalised care adjustments or exception reporting should be considered to account for situations where the patient declines, does not attend or if asking about falls is not appropriate.

Expected population size: Reeves et al. (2018) estimates that around 10% to 12% of people

aged 65 or over are moderately frail and around 3% of people aged 65 or over are severely frail. 2023 to 2024 quarter 4 GP core contract data for indicators CCDCMI38 and CCDCMI39 reports 1,524,746 people with a record of a diagnosis of moderate or severe frailty on or after 1 April 2017. This is approximately 14% of people aged 65 or over. This estimates that 2.6% of people in England have a diagnosis of moderate frailty or severe frailty (on or after April 2017): 264 patients for an average practice with 10,000 patients (using 2023 mid-year Office for National Statistics, England population statistics). To be suitable for use in QOF, there should be more than 20 patients eligible for inclusion in the denominator, per average practice with 10,000 patients, prior to application of personalised care adjustments.

Update information

April 2025: We amended the source guidance and the rationale to align with the updated NICE guideline on falls. We also included information about the expected population size and updated the title of this indicator.

ISBN: 978-1-4731-6980-7