



ANGUS HEALTH AND SOCIAL CARE
INTEGRATION JOINT BOARD – 26 FEBRUARY 2020
PERFORMANCE REPORT - FALLS ADMISSION UPDATE
REPORT BY GAIL SMITH, INTERIM CHIEF OFFICER

ABSTRACT

This report is to update IJB members on Falls activity in older people in Angus.

1. RECOMMENDATION

It is recommended that the Integration Joint Board notes the content of this report.

2. BACKGROUND

Angus IJB considered the Annual Performance Report in June 2019. The report identified positive performance across a range of national and other indicators relevant to delivering the strategic plan. Admissions to hospital following a fall in people aged over 65 showed a continued increase in Angus. The Report identified an increase in fall admissions between 2017/18 and 2018/19. The IJB asked for this to be reviewed and further information was provided to the IJB in report no 64/19, where the IJB asked for a further update to be brought in February 2020.

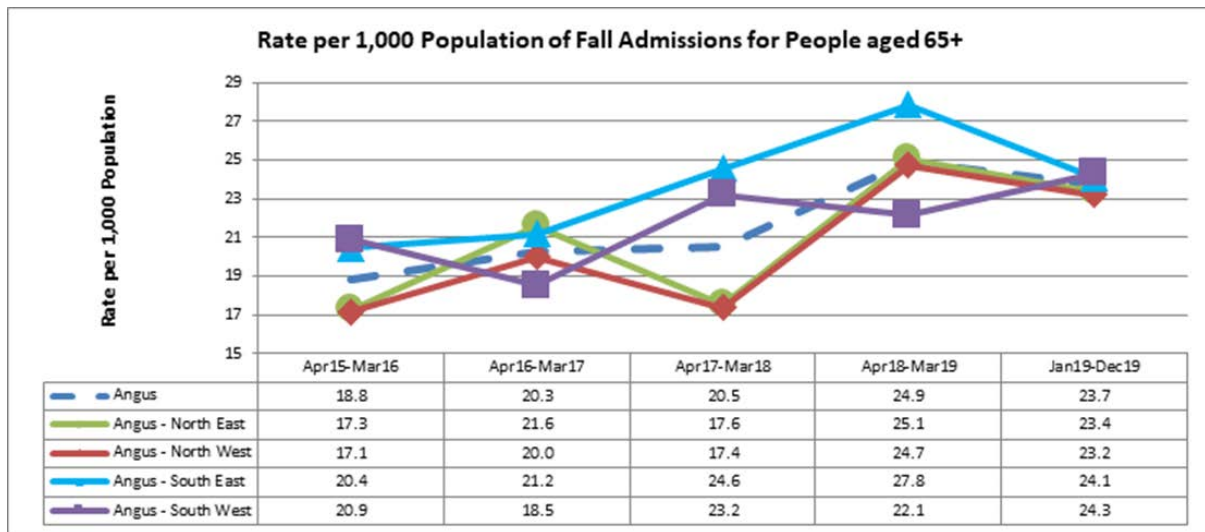
3. CURRENT POSITION

It can now be confirmed that the increase in fall admissions activity has been affected by the change in coding in Ninewells Hospital Accident & Emergency (A&E) observation ward. This was an unexpected consequence of improvements in the pathway ensuring that people had access to a more holistic assessment that could help identify the cause of a fall that led to attendance at A&E. Ninewells are aiming to resolve the coding issue to ensure that in situations where an individual goes home the same day, this is not seen as an admission.

It should be noted that in Angus residents are more likely to be over 75 than in other parts of Scotland and are more likely to live alone aged over 85. The Angus Strategic Commissioning Plan has a priority to improve the wellbeing and independence of older people. We continue to monitor the falls situation and develop new arrangements and are working both locally and nationally to consider how best to mitigate against these risks. This includes working with care at home providers and Care About Angus (CAA) to deliver home safety assessments and promote mobility. Falls alerted to Community Alarm services where there is no admission to hospital all lead to a referral to the falls service, with the aim of reducing the risk of a further fall. Locally, we have supported all enablement staff through training on LifeCurve. This involves an assessment of an individual's mobility and offers advice and guidance on exercise. We have ensured that any falls that are reported through Community Alarm lead to an automatic referral to the falls service aimed at preventing further falls.

Data:

In the year to the end of December we saw 647 people aged over 65 admitted following a fall a reduction of about 40 admissions on 18/19. During this same period there were 10,471 unplanned admissions for all adults (18+). Unplanned admission are continuing to rise.



4. FINANCIAL IMPLICATIONS

There are no financial implications arising directly from this report.

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