FALLS AT HOME IN THE AGEING POPULATION

THE PROBLEM

Falls in the home, particularly repeat fallers, result in ambulances being called. A high number of these patients are taken to Emergency Departments by the attending paramedics.

THE EVIDENCE

- 52% of trauma & injury related call outs were for falls (North West Ambulance Service, 2013)
- 72% of these patients were transferred to Emergency Departments (North West Ambulance Service, 2013)
- Falls cost the NHS £4.6 million each day and £1.7 billion per year (Age UK, 2010)
- In a trial of a clinical decision making tool twice the number of fallers were referred to falls services and costs per patient reduced from £22K to £15K (Snooks et al, 2014)

THE INTERVENTION

Decision making tools such as ‘Paramedic Pathfinder’ are a range of consistent and clinically safe evidence based processes which allow clinicians to conduct accurate face to face assessment of individual patients’ care needs when they arrive on scene.

PROFESSION

Could also involve other AHPs who have access to patients in their own home.

EFFECTIVENESS CRITERIA

Secondary prevention & risk management (priority 2)

IMPACT CRITERIA

Economic & social benefits (priority 3)
Managing risk (priority 4)