



Hospice UK response: Scottish Government consultation on falls and fractures prevention strategy

August 2019

About Hospice UK

Hospice UK is the national charity for hospice care, supporting over 200 hospices in the UK. We believe that everyone matters throughout their life right up until they die, and that no one should die in avoidable pain or suffering.

Hospice UK supports the breadth, dynamism and flexibility of modern hospice care by influencing national and local policy, improving quality of care through the sharing of good practice, and providing resources, education and training, and grant programmes.

Across the UK, hospice care supports more than 200,000 people every year, through inpatient, outpatient, day hospice and hospice at home services.

We welcome the opportunity to contribute to the Scottish Government's consultation on a falls and fracture prevention strategy for Scotland. This response has been informed by feedback from clinical leads within Scottish hospices and from analysis of Hospice UK's clinical benchmarking data on falls.

Qu. 4. Are there any key areas missing or any general amendments you would suggest? Please explain your views.

The draft strategy makes little reference to patients with palliative and end of life care needs and does not currently mention hospices. We recommend that there should be a focus on palliative and end of life care within the strategy and that hospices in Scotland should work collectively to minimise the risks associated with falls for their patients. As part of this, Outcome 10 in the draft strategy could be expanded to include a focus on hospices as well as the other settings currently listed.

Prevention of falls is a high priority for hospices, and for palliative and end of life care as a whole. Hospice UK carries out clinical benchmarking across hospices in Scotland, and the wider UK, which includes the collection of data on falls. Falls are one of the highest reported patient safety incidents within hospices.

Many patients receiving care from hospices are older adults or are living with frailty and are therefore at a higher risk of falls. The risk can be increased because of higher than normal doses of opioids, regular use of other sedation affecting drugs, delirium, brain tumours/metastases and advanced disease. Falls risk factors can be multifactorial and patients may not always be aware of their changing ability when

their health declines. Changes in medication can cause drowsiness and dizziness that may contribute to a falls risk. Patients receiving hospice care are also susceptible to weight changes, fatigue and reduced muscle bulk which can further increase the risk of falls.

Hospices in Scotland are working hard to minimise the risks associated with falls, however it is not possible to prevent falls in every situation. We recognise that hospices are often in the fortunate position of having higher staff to patient ratios and are able to place patients under supervision as required. It can be challenging for hospices to balance supporting patients to have independence with taking steps to reduce the risks of falls. Some patients may choose to remain independent and accept that they will be at greater risk of falls.

Scottish Government's strategy is aspirational and we welcome that it highlights some areas that contribute to falls which may have been less considered. Patients receiving hospice care may not need to access the full range of falls prevention assessments (e.g. bone density scans), but they need a fast approach, and staff who can work flexibly and are able to take the service to the patient rather than expect the patient to attend a clinic appointment.

Hospice UK members in Scotland gave a few further specific recommendations in relation to patients with palliative care needs:

- Clinical nurse specialists, Macmillan nurses and hospice care nurses should have an increased awareness of falls risk in the palliative patient group and refer to physiotherapy and occupational therapy as necessary to decrease falls in this population
- Those at risk of pathological fractures should be screened for falls risk and appropriate intervention following this
- Every health care professional in contact with palliative patients should be promoting maintaining physical activity
- Access to 'Move More' and similar programmes should be available to all palliative patients
- There should be more training for fitness instructors to support palliative patients (CanRehab for example)

We would welcome further discussion with the Scottish Government about our clinical benchmarking work and on our recommendation that the national strategy on falls prevention should include a focus on palliative and end of life care and hospices.

Contact

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