



The Royal Society for the Prevention of Accidents

October 2020

accidents don't have to happen



## Enabling safety

Fresh data insights on the impact of accidents affecting the most vulnerable



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# Foreword

## At RoSPA, our vision is for life, free from serious accidental injury.

This has been our story for more than a century, and despite huge improvements in safety, notably on the roads and in workplaces, the challenge remains great.

More than 14,000 people are killed in accidents across the UK each year with thousands more suffering injuries, many of which are life changing. Accidents are the leading cause of death up to the age of 39 and they particularly affect the very young, the very old and the very poor. In addition to the pain and suffering caused to accident victims, they can also put immense pressure on those with caring responsibilities for children or older relatives.

Yet accidents don't have to happen.

This message is a thread that runs through all we do, aiming to stop the needless loss and devastation that accidents cause to individuals, families, communities, businesses and society as a whole. We take a life-course approach to accident prevention, with advice, information and services that promote safety 24/7 – wherever people are and whatever they are doing.

Working with partners means we can achieve so much more and that is why we are delighted to be collaborating with RSA.

RoSPA and RSA are organisations with people at their heart and our association has the potential to make a real difference to the lives of those most vulnerable to accidental injury.

We are also committed to basing our activities on a solid evidence base, and that is why this report – the fruit of the early part of our joint working – is so important. It contains insights from injury data and research into public perceptions of accidents that will guide the next stage of our partnership – developing an intervention that will

empower and enable those most at risk of accidents to live safer, active lives.



**Errol Taylor**  
Chief executive of RoSPA

## We're focused on helping people protect what they care about most: the people around them.

As an insurer, we are passionate about using our expertise in understanding and managing risks to help our customers and communities prepare for the risks they face every day. Raising awareness of issues and changing behaviours through education is at the heart of RSA's Confident Futures strategy and our ambition to shape a smarter tomorrow.

Our partnership with RoSPA is an important part of that journey. Together we aim to raise awareness of the simple steps we can all take that allow us to live safer, more active lives. This research is a start point, helping us to identify those who are most at risk of harm, understand the barriers to action and ways we can overcome them.

There's no doubt that the after-effects of accidents can have a significant impact – emotionally and physically. But our findings show that there's a need for more support to prevent them. Nearly half of us don't feel comfortable talking to older friends and relatives about the risk of accidents, despite them being most at risk. By making tools and resources available to individuals, families and practitioners we aim to tackle this issue head on and help more people to stay safe.



**Karl Helgesen**  
Chief Claims Officer,  
CR Executive Sponsor –  
UK & International

# Introduction

**Accidents are a leading preventable cause of death, serious injury and long-term disability, which have huge impacts on the individuals who suffer them, those who care for them and wider society.**

Accidents change lives. Every year, more than 800,000 people are killed or so seriously injured that they have to be admitted to hospital following accidents, many of which are preventable. RSA has partnered with RoSPA as part of its Smarter Tomorrow programme which aims to improve society's understanding of risks so they can be managed more effectively.

Through this work together, we want to increase awareness of risks facing families at home and on the road and find ways to reduce them. While accidents happen to people of all ages, those who are most vulnerable are the youngest, oldest and poorest members of our communities. This first phase of our partnership has been research to understand the main causes of accidents, who they affect and the actions and support available to help reduce them.

## Designing our research

We've focused our research on under-5s in the home, 17-25 year-olds on the road and over-65s at home and on the road. These age groups represent a significant proportion of accidents, and the impact of accidents among these groups often extends to the "squeezed middle" – those who are responsible for caring for young children or older parents. Often these responsibilities are being juggled with busy working lives, and the trauma of an accident can cause added strain.

This report, produced through the partnership between RoSPA and RSA, aims to:

- Outline how accidents affect under-5s in the home, 17-25 year-olds on the road and over-65s at home and on the road
- Present insights on the public perception of accidents, including from those who have caring responsibilities for others
- Highlight possible actions that could prevent accidents among each of the key groups.

**Our aim is to use these insights to build awareness and action.**

**48%**  
of people have experienced a serious accident or know someone who has

Every day, more than  
**2,600**  
people are admitted to hospital as a result of an accident

**7%**  
increase in accidental deaths in the last year



## The current picture

It's clear that there is a strong case for change. Admissions to hospital for accidental injuries have increased each year since 2015. Deaths from accidents have also been increasing. There were 15,538 accidental deaths in 2018, a rise of 9.5 per cent since 2015. Similarly, the death rate from accidents rose from 24.2 per 100,000 population in 2015 to 26.3 in 2018.

Over the last four years there have been reductions in accidental death and injury rates on the roads and in workplaces, thanks to nationally-led strategic approaches to action that blend education, engineering and enforcement. However, accidents happening at home or during leisure activities have increased.

Falls are the single largest cause of accidental death, increasing by 12.2 per cent from 5,438 in 2015 to 6,103 in 2018. They also make up 59 per cent of admissions to hospital due to accidents, making them a key focus for accident prevention work.

## The hidden burden of accidents

The emotional and practical impacts of accidents go far beyond those who have experienced an accident – 43 per cent of the population have experienced anxiety or stress as a result of an accident impacting close friends or family. The psychological impacts can persist long after physical injuries have healed and can lead to other problems such as loneliness and isolation, particularly among older people.

At the same time, more than a third of employees have had to take time off work to accommodate caring responsibilities such as accompanying children or parents to medical appointments and a fifth of employees have lost money as a result of an accident.

While the vast majority of employers are accommodating to these needs in the aftermath of an accident, the self-employed can find it more difficult to meet business commitments. Follow-up medical appointments, arranging vehicle repairs and home adjustments can all require time and focus.

# Introduction

## What's next?

Across our research, there's a clear demand for more advice on accident prevention as well as help to have what can be difficult conversations with friends and family. Rather than starting with the assumption that accidents are inevitable, there are simple steps that we can all take to reduce risks to our loved ones and ourselves. Online resources and websites have an important role to play with 57 per cent of the population identifying this as the main source of information on how to avoid accidents, followed by advice from family and friends (44 per cent) and advice from an NHS social or health worker (42 per cent).

RoSPA is proud to be at the heart of accident prevention, working to stop the needless loss and devastation that accidents cause to individuals, families, communities, businesses and society as a whole. This is a huge remit, so the support of partners such as RSA is invaluable when it comes to achieving the vision of "life, free from serious accidental injury".

RoSPA's national accident prevention strategy, *Safe and active at all ages*, covers all ages and stages of life. Uniquely working across occupational health and safety, and road, home, leisure and education safety, RoSPA promotes the exchange of life-enhancing skills and knowledge by:

- **Researching** the evidence base for accident prevention, **campaigning** on the big issues and sharing **advice and information** including via the freephone Lifeline service and online
- **Working with partners** to run large-scale initiatives that provide practical tips and tools to prevent accidents
- **Training** safety professionals so they can best help the communities they serve.

The significant reductions in death and injury on the roads and in workplaces across the UK have demonstrated that a systematic approach to accident prevention works – but as RoSPA and RSA recognise, there is more to be done.

### Acting on the insights

Our research has shown that parents, carers and older people would welcome more accessible and engaging information on accident prevention. RSA and RoSPA will be working together in the next phase of their partnership to address some of these gaps, focusing on over-65s at home and helping facilitate the challenging conversations about safety that carers often need to have with their loved ones.



# Methodology

The findings in this report are based on three key areas of research:

**1. Analysis of key trends in UK accidental injuries and deaths since 2015.**

A team of epidemiologists led by Professor Allyson Pollock, Director of the Institute of Health and Society in the Faculty of Medical Sciences, Newcastle University, collated and analysed data on accidents impacting identified age groups (for key data sources see page 26). Unless otherwise stated, all hospital admissions data within this report is for England and all mortality (death) data is for England and Wales.

The section covering 17-25 year-olds on the road, draws on data as closely aligned with this age range as possible; however due to differences in the age bandings used across various data sources, some data covers 17-24 year-olds or 15-24 year-olds.

**2. Public survey on experiences and perceptions of accidents.**

A nationally representative YouGov survey of 2,000 UK residents was conducted in March 2020 exploring public experiences and perceptions relating to accidents.

**3. Focus groups exploring the perceptions and effect of accidents on family networks.**

A series of focus groups explored the experiences of working adults, who have caring responsibilities for family members and have been impacted by an accident. Further focus groups sought insights from people aged over 65 on the impact of accidents, and their prevention.

**RoSPA and RSA would like to thank everyone who contributed to the research.**





# 1. Under-5s in the home

## The big picture

Accidents in the home affect all age groups but young children are particularly at risk. Many accidents that occur in the home are minor, but for the tens of thousands of children admitted to hospital each year it's important that we focus on measures that can be taken to protect families. We want to see a world free from serious accidents where all children can reach their full potential.

## Key findings

Many parents consider minor accidents to be an important part of the learning experience. However, it's important to remember that no accident is inevitable for young children and for the 40,000+ under-5s admitted to hospital each year, there are steps we can take to help make our homes safer.

Messages to improve safety seem to be getting through. Almost 90 per cent of parents we surveyed felt confident that they knew how to keep their child safe from accidents at home. The mortality rate due to accidents among this age group has reduced by 24 per cent since 2015, and hospital admissions for accidental injuries among under-5s have reduced 6.5 per cent over the same period. However, for the 60 families that have lost young children due to accidental deaths over the last year, this will be of little comfort.

The challenges of keeping young children safe are also a source of worry and strain among parents. Parents of young children are twice as likely to worry about under-5s experiencing serious injury or death as a result of an accident than the general population.

Our findings also highlight stark differences on the risks facing under-5s based on families' socio-economic backgrounds. For example, the emergency hospital admission rate for falls from furniture among under-5s is 40 per cent higher in the most deprived areas, compared to the least deprived areas.

Although admissions to hospital are reducing every year, there is more that can be done. Parents are generally aware of the role of safety devices such as cupboard locks and safety gates, the need to keep electrical appliances out of harm's way and avoid choking hazards; however, there is a need for a single, reliable source of information on child accident prevention. Many parents rely on the internet and social media and would welcome tools that bust myths and provide dependable information.

**118**

under-5s are admitted to hospital every day as a result of an accident at home

**89%**

of parents feel confident keeping their child safe from accidents at home

**Falls**

are the leading cause of hospital admissions among under-5s

# Our insights

Under-5s make up five per cent of all hospital admissions due to accidental injury. At less than two per cent, accidents are responsible for the lowest percentage of deaths in this age group than for any other age group.

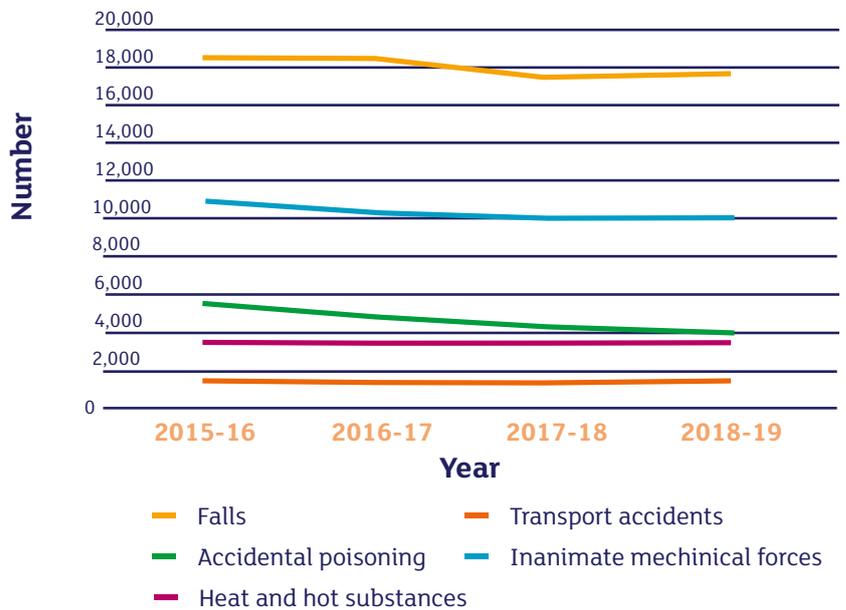
While there has been a small reduction in hospital admissions for accidental injuries among under-5s since 2015, there is still a need to increase public awareness of the most likely causes of accidents in the home:

- Falls are the leading cause of hospital admissions among under-5s, making up 40 per cent of visits
- Falls from furniture account for more than a quarter of falls among under-5s, and they result in longer stays in hospital than other types of fall
- More than a third of hospital admissions due to burns and scalds are among under-5s.

In contrast to hospital admissions, threats to breathing like suffocation, strangulation and drowning are the most common causes of accidental death among under-5s. Despite making up less than two per cent of accident-related admissions to hospital, they cause almost half of deaths from accidents among under-5s.

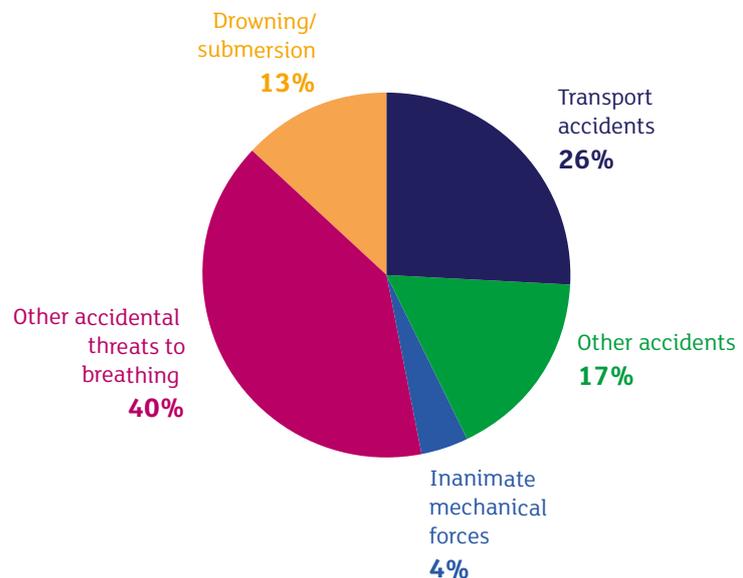
**Figure 1. Leading causes of hospital admissions in under-5s, England since 2015**

Source: NHS Digital, 2015/16-2018/19, HES - hospital admitted care activity in England



**Figure 2. Causes of accidental death in under-5s, England and Wales since 2015**

Source: Office for National Statistics, 2015-2018, Deaths registered in England and Wales





## Simple steps to keeping under-5s safe at home

Simple steps can make a big difference:

- Babies can move quickly and unexpectedly, so never leave your baby alone on a raised surface
- Use safety gates at the top and bottom of the stairs once your baby is on the move
- Keep hot irons, curling tongs and hair straighteners, and their cables, out of reach – even when cooling down
- Always use a fireguard around fires and secure it to the wall
- Never leave a baby or toddler to feed alone, cut small foods such as grapes into quarters
- Keep cots free of heavy quilts, bumpers, pillows and toys
- Choose blinds that don't have looped cords or secure cords out of reach, and never install blinds with a cord in a child's bedroom
- Never leave a young child unattended in the bath and always run cold water before hot.

## Public perception

Among the parents of under-5s, falls are unsurprisingly one of the greatest perceived risks to young children – especially the risks from stairs and furniture when children become more mobile.

*“ It only takes a moment to underestimate your child, have a lapse in concentration or to be distracted for something to happen. ”*

– Focus group participant

In focus groups, many parents observed that it was inevitable that young children would have minor accidents during their early years; and many said they believed these were important learning experiences and had a place in helping children improve their understanding of the world around them.

Emergency admissions have considerable socioeconomic implications. The rate of falls from furniture for under-5s during 2014/15 – 2016/17 increased by 40 per cent between the least deprived decile and the most deprived. Burns and scalds from food and hot fluids increased by almost 150 per cent from the least deprived decile to the most deprived. In our survey, nine per cent of parents from less affluent backgrounds expressed a lack of confidence in keeping under-5s safe at home compared to five per cent among those from more affluent backgrounds.

While most parents report using a range of preventative tools to help reduce the risk of accidents, including safety gates and drawer and cupboard locks, they highlight their children’s inherent desire to climb furniture, shelves and drawers as a significant risk which requires other interventions such as:

- The secure fixing or wedging of lightweight and unstable furniture that could topple if climbed
- The covering of sharp corners on furniture.

*“ It is almost inevitable that they’re going to have some sort of accident. I think you have to let them explore and you have to let them learn for themselves. ”*

– Focus group participant

Alongside the risk of falls from furniture parents recognised the potential dangers presented by choking, burns and scalds, bath time and electric wall sockets. The risks of suffocation associated with bedding were not as widely recognised, despite this being a key cause of accidental deaths.

Currently, parents gain most of their knowledge from the internet and social media, although they acknowledge that not everything is credible; advice from health visitors/social workers and friends and family is also a source of information. Parents highlight the lack of a single, consistent, reliable source of information on child accident prevention as a key gap.

**59%**

of parents feel that unsafe environments contribute to accidents in the home

**61%**

of parents seek accident prevention advice online

More than

**1/3**

of hospital admissions due to burns and scalds are amongst under-5s

# Summary

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- Accidents among under-5s are a significant health issue, being a major cause of preventable death, serious injury and long-term disability.
- The way advice is given to parents is important and needs to take account of the realities of life with young children as well as being practical to implement.
- Parents of under-5s would welcome an app as a source of credible child safety advice as well as pre-school interventions to raise awareness of basic information.

## Acting on the insights

RoSPA's [Keeping Kids Safe web hub](#) provides valuable advice for parents of under-5s, and a space where tips and advice can be shared. In recognition of the socio-economic inequalities when it comes to accidents, RoSPA's Brighter Beginnings Appeal raises money for the provision of Keeping Kids Safe packs to families in need. Employers increasingly recognise that their safety responsibilities go beyond the workplace, and are engaging employees in more creative ways.



# 2. 17-25 year-olds on the road

**40%**

of the population think 17-25 year-olds are most at risk from having a serious accident on the road

**2.7x**

higher road traffic casualty rate among 17-25 year-olds compared to the average for all age groups

**82%**

of young people think distractions are a factor contributing to road accidents

## The big picture

Road accidents are the leading cause of accidental death for 17-25 year-olds. This mirrors global data which shows road accidents are the leading cause of death among young people aged 15-29 worldwide. Road accident casualty rates are also far higher among 17-25 year-olds than other age groups. This places a huge emotional burden on families and young people, leading to higher levels of anxiety, strain on relationships and negative impacts on work.

## Key findings

Accidents among young adults are a significant cause of hospital admissions, making up 48 per cent of admissions due to external causes among 17-24 year-olds in 2018/19, more than self-harm and assaults combined.

Road transport accidents account for 17 per cent of hospital admissions due to accidents among this age group, but a cause for concern is they make up 48 per cent of accidental deaths – demonstrating the fatal consequences of errors in judgement, careless behaviour or inexperience.

Road transport injuries and deaths are significantly higher among men than women; 83 per cent of road deaths among young adults in Great Britain in 2018 were male while young men made up 62 per cent of road casualties.

Despite a small increase in 2016, it's positive to see that the number of deaths from road accidents among 15-24 year-olds has fallen from 2015 to 2018. This positive trend continues in road traffic casualties per 100,000. However, while casualty rates among drivers and passengers in the 17-25 age group have declined since 2015, this reduction has come largely from "slight" casualties. The "fatal or serious" casualty rate has increased since 2015, demonstrating more can be done to promote safe behaviours.

The emotional impact of accidents among this age group also appears to be higher than for other age groups, with 54 per cent of 18-24 year-olds reporting experiencing anxiety or stress as a result of accidents and 22 per cent reporting a negative impact on work or focus.





## Our insights

More than 8,000 young people aged 17-25 years old are admitted to hospital as a result of a road accident each year. This represents 17 per cent of all hospital admissions due to accidental injuries among this age group. Positively, road accident admissions are declining, with a 13 per cent reduction between 2015 and 2018.

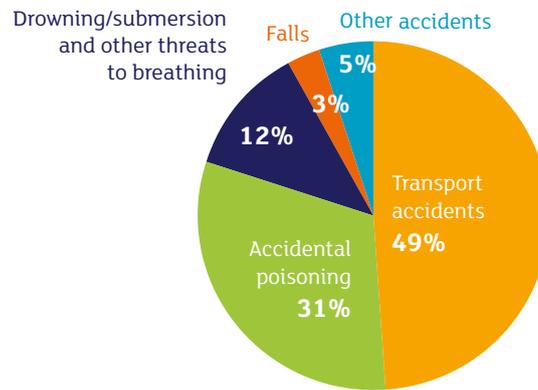
However, data from the STATS19 police database shows that per person, the casualty rate among 17-25 year-olds is 2.7 times the general population (456.5 compared to 168.8 for all ages).

Although road traffic casualty rates have been falling, both injuries and deaths on the road are significantly higher among young men than young women. Men make up 62 per cent of road casualties and 83 per cent of deaths among this age group.

The majority of young adults injured in road accidents are in cars or on motorcycles. Data from the Trauma Audit and Research Network from Oxford University Hospitals reveals that 84 per cent of traumatic injuries among this age group involve a car or motorcycle compared to 14 per cent involving pedestrians or cyclists.

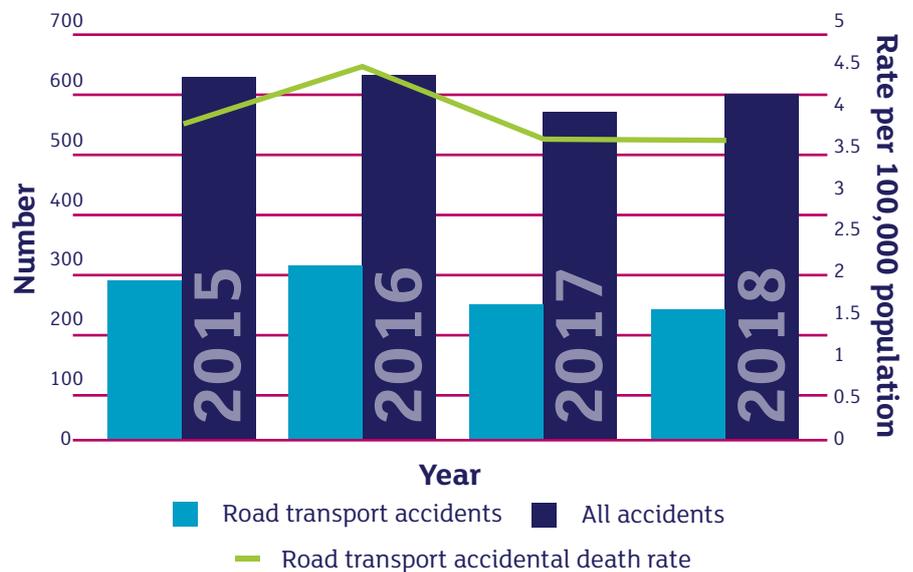
**Figure 3. Causes of accidental death among 15-24 year-olds, England and Wales since 2015**

Source: Office for National Statistics, 2015-2018, Deaths registered in England and Wales



**Figure 4. Number and rate of accidental deaths among 15-24 year-olds, England and Wales 2015-2018**

Source: Office for National Statistics, 2015-2018, Deaths registered in England and Wales



## Public perception

Our research highlights that 40 per cent of the population think 17-25 year-olds are most at risk from having a serious accident on the road.

Research among the parents of 17-25 year-old drivers and motorcyclists who had been involved in an accident on the road identified concerns around young drivers' inexperience and their limited ability to "read the road" and anticipate danger. Even after several years of driving or riding, some parents still worried about their children and asked them to make contact when they reached their destination.

*“ You can't help worrying. He's been driving for six years, since he was 17, and I try to put it into the back of my mind, but I can't help worrying. ”*

– Focus group participant

While the majority of accidents discussed in parent focus groups were deemed to have been the fault of other drivers, there was recognition that they may have been avoided if the young person had more driving experience. The perceived inability of young drivers to judge the speed of other vehicles was highlighted as a principal cause for concern.

*“ My son had an accident at the roundabout. It was about a month after he passed his driving test. I don't think he judged it very well....I don't think he got how fast it was going so he thought he had time to go out. ”*

– Focus group participant

In-vehicle distractions, such as phones, sat navs, music and passengers, are also a concern for the parents of young drivers, alongside driving in adverse weather and the unpredictability of other road users such as cyclists and pedestrians. Our research found that 82 per cent of young people identified distractions as a factor contributing to road accidents, higher than any other age group.

Parents believe that on-road driving experience is critical in improving the safety of young drivers, particularly to help them develop the skills to cope with different hazards.

*“ You find that the hazard perception grows with experience from driving. I know my son's hazard perception when he first passed was non-existent. ”*

– Focus group participant

**39.5%**  
of people think that  
17-24 year-olds are  
the most at risk on  
the road

**82%**  
of young people  
identified  
distractions as a  
factor contributing  
to road accident

**64.8%**  
of people think  
that lack of  
experience is a  
contributing factor  
to road accidents

Parents advocate young drivers spending more time learning to drive in different environments in order to develop their skills. They also want greater priority and visibility given to road safety and accident prevention initiatives in schools to proactively share the wealth of information available on road safety.

Advances in safety features and other technologies built into vehicles are recognised as improving safety, although parents often consider these “premium” products to be out of the financial reach of young drivers. The use of telematics technology, particularly when linked to insurance premiums, is perceived to have a positive impact on the speed and general driving behaviours of young people.

The burden of accidents on families can be significant, with parents having to find the time and strength to support their child through the emotional and physical trauma, as well as the more practical challenges of managing the repair or replacement of a vehicle. Young people also face an emotional burden – reporting higher levels of anxiety and stress associated with accidents than other age groups. These hidden consequences exist not just in the immediate aftermath of an accident but for a considerable time afterwards.

## Summary

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- In the face of national accident figures and families’ own personal experiences, it is the inexperience of young drivers that is the principal concern of parents, while young people are most concerned about in-car distractions.
- More visible road safety education in schools, and a requirement for learner drivers to practise in a range of situations and environments, with a probationary period as part of a driving licence to support the continuing build-up of experience post-test, could help address the issue of inexperience.
- Further development of telematics technology to support safer driving should also be explored, including as part of insurance packages.

### Acting on the insights

RoSPA’s [Helping L Drivers website](#) is a useful resource for parents and others who are supporting a young person in learning to drive. It includes information and advice on how to get the most from professional lessons, how these can be complemented by private practice and ideas for promoting safety after the test. [More Than’s “Smart Wheels” young driver insurance](#) has been designed to help 17-24 year-olds stay safe by offering rewards for maintaining a safe driving score.



# 3. Over-65s on the road and in the home

## The big picture

Accidents in the home and on the road are a leading cause of harm among over-65s, and sadly they're on the rise. More than 9,000 people aged over-65 die as a result of an accident each year and there are more than 430,000 accident-related hospital admissions among this age group. These accidents do not have to happen. Indeed, people are increasingly seeking to make changes to enable them to enjoy a productive, independent and healthy later life – but more advice and information is needed to help prevent accidents and their devastating impact on individuals, families and communities.

## Key findings

Over-65s make up half of hospital admissions due to accidents and account for 59 per cent of accidental deaths. Hospital admissions due to accidental injury among this age group have risen 11 per cent since 2015.

Falls are the largest single cause of both hospital admissions and accidental deaths among over-65s, while road transport accidents are the second largest cause of accidental deaths. Road casualty rates among this age group are also 1.4 times higher than the national average. Disturbingly, mortality rates also show an increasing trend; with the number of people aged over-65 projected to rise by nearly 20 per cent between 2016 and 2026, this is extremely concerning.

Data shows the oldest are at greater risk, with those aged 90+ being more than 25 times more likely to die as a result of an accident than those aged 65-69.

In line with these trends, 69 per cent of people think over-65s are most at risk from having a serious accident at home. However, 45 per cent of people don't feel confident raising concerns about the risks of accidents with older friends or relatives and only 36 per cent would be comfortable passing on advice and information about how to prevent accidents.

Our focus groups identified a need for more to be done to support family and friends in raising safety concerns and challenging the perception that accidents are inevitable by enabling access to advice on accident prevention for older people and their carers and creating a culture of talking more openly about the actions that can be taken.

**80%**

of hospital admissions due to accidents among over-65s are as a result of falls in the home

**11%**

increase in hospital admissions due to accidents since 2015

**45%**

of us don't feel comfortable talking to older friends and relatives about the risks they face

# Our insights

## Accidents in the home

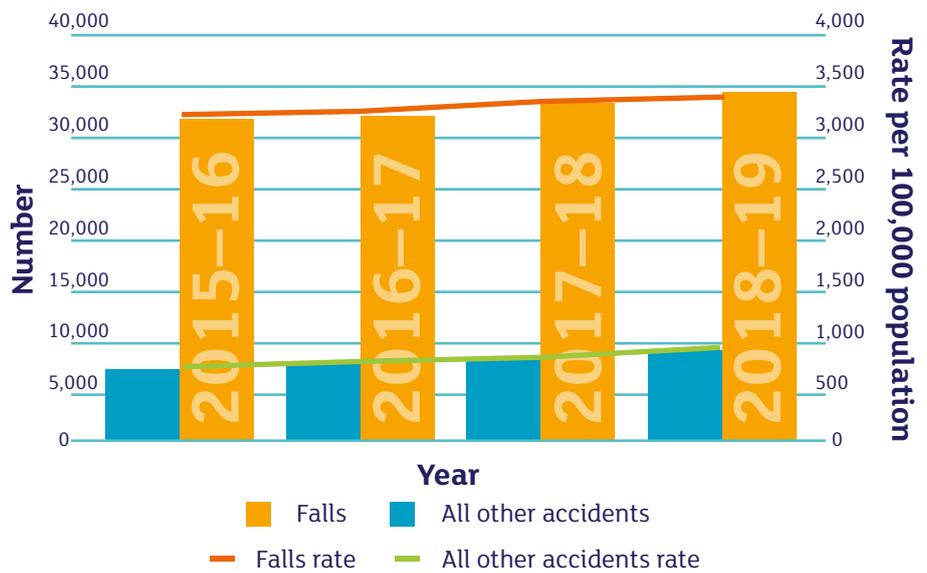
Research in A&E departments has shown that 69 per cent of accidental injuries among over-65s occur within the home.

### Falls

Falls are by far the biggest cause of both accidental injuries and deaths among over-65s. Of the more than 9,000 accidental deaths in this age group in 2018/19, 60 per cent were as a result of a fall, while 80 per cent of hospital admissions caused by accidents were due to falls, with a large proportion of these being falls at home. About a third of all people aged over-65 fall each year, increasing to half of those aged 80 and over.

**Figure 5. Leading accidental causes of hospital admissions (number and rate per 100,000 population) for over-65s, England since 2015**

Source: NHS Digital, 2015/16-2018/19, HES - hospital admitted care activity in England



The death rate from falls per 100,000 population in the over-65 age group has also increased since 2015 – with a seven per cent increase between 2017/8 and 2018/9, up to 50.4 from 47.3.

Falls and fragility fractures (those sustained in falls from standing height or less) can result in more than just physical impacts. Fear of falling can result in activity avoidance, loneliness and social isolation while those experiencing falls can face a loss of independence. Most falls occur as a result of a combination of factors, including muscle weakness, poor balance, visual impairment and medical conditions, as well as environmental hazards and use of certain medicines. However, falls should not be seen as an inevitable part of ageing and preventing the “first fall” is particularly important.

*“ Your vision starts to become impaired as you grow older...anything you’re going to trip over, you’re not going to see always. ”*

– Focus group participant

In focus groups, over-65s, as well as their family members, perceived trips and falls in the home to be the greatest risk for older people. They also identified insufficient support and advice for older people and their carers. A communications campaign highlighting the physical and cognitive changes that can be expected with ageing, and how best to adapt to them would help address some of these issues.

## Other causes of accidental harm at home

By contrast, exposure to fire, flames or smoke led to just 323 hospital admissions among over-65s in 2018/19. At 100, the number of fire-related deaths in this age group is just above half of the national total, although rates overall are declining. Focus group attendees acknowledged open fires and gas appliances as risks, particularly among those with poor memories.

*“ It’s easy to leave things on like gas... there’s a bigger potential when you get older to forget that something’s on. ”*

– Focus group participant

Focus group respondents also raised medication management as a cause for concern. Forgetting to take medication, taking more than required or taking the incorrect tablets were all common concerns.

The use of garden tools, ladders and other appliances were also highlighted as risks. For example, slipping with a knife and electric shocks from old or faulty appliances were cited as potential causes of harm. Choking was also identified as a concern, especially for those who live alone.

## On the road

Road transport accidents are the second largest cause of accidental death in this age group, although numbers have fallen slightly from 458 in 2015 to 448 in 2018. STATS19 data on road traffic collisions across Great Britain also shows that casualty rates per 100,000 of the population aged over-65 have decreased slightly from 232.4 in 2015 to 229.1 in 2018.

The fatality rate among drivers aged 70 or over is the highest for all age groups, and for every mile driven the risk of a person aged 80 or over being killed while driving is 10 times higher than the lowest risk 40-49 year-old.

The over-representation of older drivers in road deaths is mostly due to their increased frailty, leaving them more susceptible to serious injuries. A general decline in the number of casualties has been seen in most vulnerable road user groups over the past five years, yet casualties among those aged over 70 have remained fairly constant.

The Older Drivers Task Force report, *Supporting Safe Driving into Old Age: A National Older Driver Strategy*, published in 2016, identified older drivers as less likely to be involved in crashes, but when they are, being more likely to be seriously or fatally injured.

In focus groups, some over-65s, as well as their family members, recognised that deteriorating vision and slower response times present a particular risk to older road users. However, older drivers are often dismissive of the need to make any adjustments to driving behaviour, whereas carers reported finding it very difficult to approach this subject.

*“ Your reactions slow down, like driving is a major thing, isn’t it? When you notice that your reactions are not the same as they were, your instincts are not the same. Don’t kid yourself. ”*

– Focus group participant

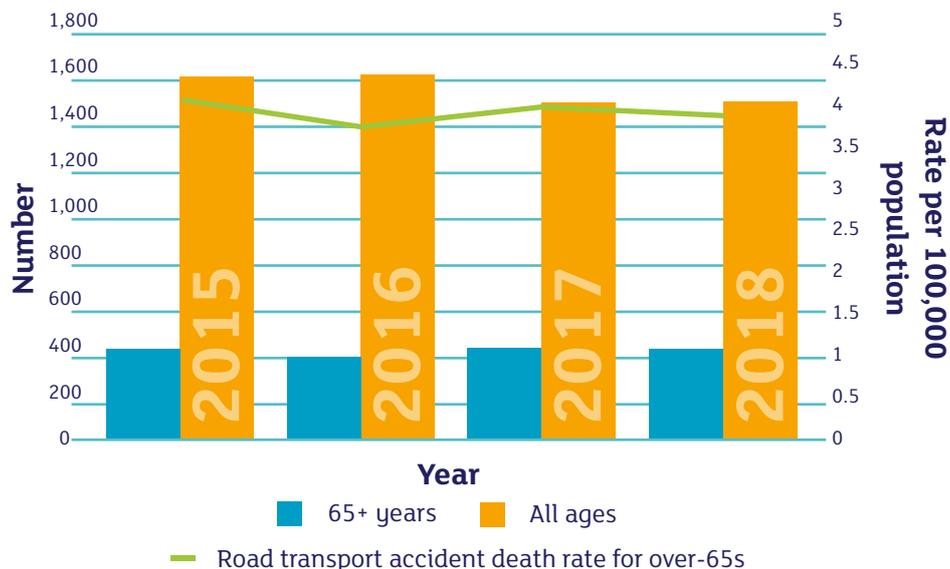
**69%**  
of people think over-65s are most at risk from having a serious accident at home

**39%**  
of people think there is not enough information available to keep over-65s safe from harm in the home

**45%**  
of people do not feel confident raising concerns about the risk of accidents with over-65s

**Figure 6. Number and rate per 100,000 population of road accident deaths among over-65s, England and Wales since 2015**

Source: Office for National Statistics, 2015–18 Deaths Registered in England and Wales.



*“ It is very difficult for all of us, who haven’t had that conversation yet. It’s really hard. But thankfully my father with mild dementia turned around and said, ‘I think I need to stop driving, don’t I?’ ”*

– Focus group participant

While recognising the health and social benefits of driving, concerned family members identified driving restrictions on motorway or night-time driving or retesting based on medical grounds as ways to reduce the risks. Participants also felt that there was not enough support and advice for older people and their carers, and suggested accessible safety information for older people would be useful.

The challenge is to enable older people to drive safely for as long as possible. For many older people, driving promotes independence, freedom and connection with others; however, for it to be done safely there is a need for more advice and information, both for older drivers and their families, who often identify issues first.

## Public perception

Over-65s recognise reductions in physical and cognitive abilities. However, despite this, there remains some reluctance to accept that accidents are increasingly possible, and that preventative actions could help reduce the risk of future accidents.

*“ We have this strange confidence about what our abilities are, and certainly you find physically, you’re not up to scratch of what you are mentally sometimes. ”*

– Focus group participant

Most research participants felt there was insufficient support and advice on accident prevention for older people and their carers; 45 per cent of people did not feel confident raising concerns about the risk of accidents, while 55 per cent lacked the confidence to suggest safety improvements. Only 36 per cent of people surveyed in our research felt comfortable passing on accident prevention advice. Existing advice is considered to be too formulaic and generic, failing to address the specific circumstances and challenges faced.

Many carers in the research describe having suggested changes in behaviours and the movement of obstacles to help avoid accidents, which has faced strong resistance by their older relatives. Older people express a desire to remain independent; however, unwillingness to acknowledge, accept and take action to prevent accidents can be a source of tension among family members who are keen to help.

Covering four decades, the likelihood and impact of accidents among over-65s can vary significantly. For advice to be effective, generalisations must be avoided, and interventions based on detailed evidence. For example, maintaining and improving muscle strength through “strength and balance” exercises has been shown to be a positive falls prevention technique.

The impact of accidents is not only felt by those suffering an accident. Caring responsibility can lead to heightened stress levels and arguments and require coping mechanisms to manage the emotional burden.

*“ I try to emotionally detach myself from the situation, to protect myself and my family, and just deal with his needs as and when they come. It ensures I keep my head above water as well ”*

– Focus group participant

In focus groups, family members explained that they are often the first port of call when an older relative has an accident, even if medical attention is required. The aftermath of an accident is felt to have the greatest impact on carers’ workplace attendance and performance.

## Summary

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- For over-65s, hospital admissions and death rates as a result of an accident are above average, and rising, yet the vast majority of accidents are preventable. Falls in the home are a particular cause for concern.
- People increasingly seek to make changes to enable them to age well and to enjoy a productive and independent healthy older life. However, our research participants identified a limited amount of information available to prevent harm. There is also a particular demand among carers for advice and guidance on approaching challenging conversations with older friends and relatives.
- Programmes aimed at preventing accidents among over-65s have become critical to reducing harm, A&E attendances and hospital admissions.

### Acting on the insights

RoSPA has worked to promote older people’s safety for many years. Its Life on the Road project, (the subject of the 100 Year Old Driving School series) and [older drivers website](#) aim to reduce accidents on the road. Stand Up, Stay Up supported the development of new strategies to prevent falls in the home and brought together practitioners to share best practice.

Moving forward, RoSPA and RSA will promote the concept of older people remaining active for as long as possible to reduce their risk of falling, by providing a web hub of supporting information and advice and running a series of strength and balance virtual roadshows. This programme is an excellent opportunity to help address the issue raised in this report, by empowering and enabling older people to live safer, active lives.

# Data sources

Data used to produce this report has been collated from a wide range of publicly available sources, as well as field research through a public survey and focus groups. A description of these sources and references are listed below. We would like to thank members of the public for their invaluable support in completing our survey and attending focus groups.

## 1. NHS Digital Hospital Episode Statistics – Hospital Admitted Patient Care Activity England: External Causes

- Routinely collected from all NHS admitted patients to hospitals across England in a financial year e.g. 2018/19 figures collected between April 1, 2018 and March 31, 2019.
- Uses ICD-10 codes to categorise injury.

<https://digital.nhs.uk/data-and-information/publications/statistical/hospital-admitted-patient-care-activity>

## 2. Office for National Statistics – Deaths Registered in England and Wales

- ONS centrally collects data for all registered deaths from local authorities in England and Wales in a calendar year.
- Uses ICD-10 codes.

<https://www.nomisweb.co.uk>

## 3. National Records of Scotland – Vital Events Reference Tables: Deaths, causes

- Collects all deaths registered by medical professionals across Scotland in a calendar year.
- Uses ICD-10 codes.

<https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/general-publications/vital-events-reference-tables>

## 4. Northern Ireland Statistics and Research Agency – Births, Deaths and Marriages: Cause of Death

- Collects all deaths registered in Northern Ireland in a calendar year.
- Uses ICD-10 codes.

<https://www.nisra.gov.uk/publications/registrars-general-annual-report-2016-cause-of-death>

## 5. Public Health England Fingertips tool

- Collects data on hospital admissions across England, broken down by areas or regions of England. Includes information on socio-economic inequalities in relation to injuries.
- Uses NHS Digital HES data (ICD-10) and Department for Transport STATS19 police data.

<https://fingertips.phe.org.uk/>

## **6. Department for Transport – Road Accidents and Safety Statistics: Reported Road Casualties Great Britain**

- STATS19 police data collected by police at road traffic accidents, collated centrally by DfT.

<https://www.gov.uk/government/collections/road-accidents-and-safety-statistics>

## **7. Home Office – Fire Statistics: Fatalities by age, gender and type of location, England**

- Collected by fire services for fires attended across the country, collaborated centrally by the Home Office.

<https://www.gov.uk/government/collections/fire-statistics-great-britain>

## **8. Trauma Audit Research Network data, Oxford University Hospitals NHS Foundation Trust**

- Data on severe injury leading to hospital admission under Trauma and Audit Research Network (TARN) criteria to the Oxford University Hospitals NHS Foundation Trust hospitals from January 1, 2012 to January 24, 2015.

<https://www.tarn.ac.uk/>

## **9. Royal College of Emergency Medicine, Oxfordshire emergency department data**

- Injury data were collected from January 1, 2012 to March 30, 2014 from patients attending the emergency departments of the John Radcliffe Hospital in Oxford and the Horton General Hospital in Banbury.

## **10. RoSPA, Safe and active at all ages: A national strategy to prevent serious accidental injuries in England, 2018**

- Extensive research on accidents and relevant issues.

## **11. YouGov survey**

- Findings of the above research were used to create multiple choice questions for a YouGov nationally representative survey of 2,000 UK residents. The focus was on the working-age population as a whole; those living with under-5s and those living with 18-25 year-olds.

## **12. Focus groups**

- RoSPA appointed a specialist agency to run a series of focus groups with those that defined themselves as carers, not in an official capacity but within a familial role.
- The research focused on working adults (part time and full time), aged between 25 and 60, who have caring responsibilities and are impacted by accidents affecting their family members, notably under-5s, 17-25s and over-65s. Over-65s were also included in focus groups to gain their perspective on accidents and their prevention.



accidents don't have to happen

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