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Rural Falls Forum Community Care

Lorraine Lovitt
14th November
2011

Falls
Prevention
is
everyone's
business

Key Objectives

- Promote quality improvement approach to falls prevention
- Reduce Fall injury among older people – enhance safety
 - In hospitals, community and residential aged care
- Improving outcomes through partnerships



Where falls occur in the home

- 54% in living areas, hallways, and the bedroom.
- 10-12% in bathrooms, kitchens, laundry and toilets.
- Stairs 9%
- Falls in the yard
- 57% in the garden



.... in the community

- **67% of falls occur in person's own home**
 - 40% inside the home
 - 26% in the yard
- **28% in a public place**
- 4% in someone else's home or yard

..... in public places

28% in public places



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- 40% footpaths
- 22% service/trade/ public buildings
- 14% roadways and parking areas
- 10% open space
- 7% sports areas
- 4% public transport areas

Reported activity at time of fall



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- 44% walking
- 17% physical work/chores
- 16% carrying /bending
- 11% steps/kerbs
- 6% hurrying
- 5% self care
- 5% physical activity/exercise

FALLS BEST-PRACTICE



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Australian Commission on
Safety & Quality in Health Care
2009

*Preventing falls and Harm from
Falls in Older People:*

- *Australian Hospitals*
- *Community Care*
- *Residential Aged Care*



Preventing Falls
and Harm From Falls
in Older People

Best Practice Guidelines
for Australian Community Care
2009

Community Care

FALLS BEST-PRACTICE



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Hospitals



Residential Aged Care

Gold bar evidence scale



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- One good quality RCT



- At least two good quality RCTs,
-little inconsistency



- Multiple RCTs and/or systematic reviews
-little inconsistency



Falls prevention

- what works

- High level balance exercise in group or home settings (functional balance exercises, Otago, Tai Chi)



- Occupational therapy interventions (home safety modifications in association with transfer training and education) in high risk populations



- Expedited cataract surgery



Falls prevention - what works

- Restriction of multifocal glasses use in older people who take part in regular outdoor activity
- Pharmacist-led education and GP medication revision
- Podiatry intervention in people with disabling foot pain



Falls prevention - what works

- Withdrawal of psychoactive medications



- Intensive multidisciplinary assessment of high risk populations



- Intensive interventions in hospitals



Falls prevention - what works

- Vitamin D supplementation in residential aged care



- Comprehensive geriatric assessment in residential aged care



- Medication review in residential aged care



What doesn't appear to work



- Updating glasses (increases fall risk?)
- Multifocal glasses restriction in inactive older people
- Brisk walking (increases fall risk?)
- Otago exercise program in people < 80, with visual impairment or taking psychoactive drugs
- Tai Chi in frail older people?
- Gentle and seated exercise

Multiple interventions



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- Group learning sessions run by community organisations can be effective eg Stepping On Program

Multifactorial Interventions

- Assessing an individual's falls risk
- Arranging referral and providing direct treatment to reduce risks

Management Strategies



- **Falls Risk screen and assessment** of all older people for falls risk
- **multidisciplinary** engagement in plan of care
- Balance and mobility limitations – assess & intervention
- Cognitive impairment – increased risk of fall

Management Strategies



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- Contenance – assess
- Feet and footwear – foot pain, ill-fitting shoes
- Syncope – unexplained falls/collapse
- Medications – review
- Vision – regular eye examination
- Environmental issues – poor lighting

New falls plan 2011 – 2015



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Prevention of Falls and Harm
from Falls among Older People

2011–2015

Policy Directive
Compliance with this
policy directive is
mandatory.

Doc No: PD2011_029

Resource



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Staying active and on your feet

NSW Health

LIVE LIFE WELL

How to get up off the floor

2. Crawl or drag yourself to a chair
3. Face the chair and get up on your knees
4. Bring one knee forward and put that foot on the floor, then use the chair to push up with your arms until you are upright enough to pivot your bottom around to sit
5. Rest for a while before standing up



Home based exercises



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active & healthy



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Find an Exercise Program in NSW...

Location

Distance

[Find Now!](#)

Staying Active and Healthy

Staying physically active is **the** single most important thing we can do to stay fit and independent as we get older. Physical activity is good for our bodies and our minds. It also helps us to remain independent and to get the most out of life.

Research shows that we can substantially reduce our risk of a fall by doing moderate exercise for at least 30 minutes on most days of the week, and by incorporating balance and leg strength exercises such as those you will find on this website, into our daily routine.

[Click here to read more.](#)

Finding an Exercise Program in Your Local Area

There are three simple steps to finding an Exercise Program in your local area. All you need to do is:

1. Enter your Town or Suburb in the **Location** field in the orange box on the left of this screen.
2. Enter a search distance in the **Distance** field underneath. The system will automatically default to 5kms (recommended) but you can choose between 1km

[search this website](#)



www.activeandhealthy.nsw.gov.au



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NSW Falls Prevention Network

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NSW FALLS PREVENTION NETWORK

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Events

NSW Falls Prevention Network Forum

The NSW Falls Prevention Network Forum was held on Friday 27th May 2011

[Falls Network Forum Program Final](#)

[Presentations now available](#)

Most presentations were filmed and will be available on a CDROM, if you would like a copy please send an email to e.vance@neura.edu.au with details of your position, facility and mailing address.

Resources

NEW: NSW Public Health Bulletin - Falls Prevention Special Issue Volume 22 No 3 & 4 2011

The current issue of the New South Wales Public Health Bulletin features a range of articles on Falls Prevention in NSW, this issue can be accessed at <http://www.publish.csiro.au/nid/228/issue/5787.htm>

NSW Health Policy Directive

[Prevention of Falls and Harm from Falls among Older People 2011-2015](#)

active & healthy website

A new website to locate Falls Prevention Exercise Programs in your local area within NSW as well as other resources

[active & healthy website](#)

[active & healthy website flyer](#)

[Staying active and on your feet order form](#) - A new

FALLS LINKS Volume 5 Issue 4 2010



Australian Commission on Safety and Quality in Healthcare 2009 Falls Prevention Best Practice Guidelines

The Australian Commission on Safety and Quality in Health Care (ACSQHC) *Preventing Falls and Harm from Falls in Older People: Best Practice Guidelines for Australian Hospitals, Residential Aged Care Facilities and Community Care 2009* were endorsed by the Australian Health Ministers in November 2009, and are now available. These revised guidelines are evidence based and were developed by a national panel of experts in falls prevention and designed to assist hospital, residential aged care facilities and community care providers to implement best practice in falls prevention. They are extensive and include evidence-based intervention recommendations and cost-effectiveness evidence where available. Research has shown that falls can be prevented. The guidelines are to inform clinical practice in three settings: the hospital, community care and residential aged care.



About the Guidelines

For each setting there is a Guideline which provides the evidence-base and a Guidebook which is a shorter version of the Guideline designed for front-line staff.

- **A Guideline:** *Preventing Falls and Harm from Falls in Older People: Best Practice Guidelines.*
- **A Guidebook:** *Guidebook for Preventing Falls and Harm from Falls in Older people.*

Also available are:

- **Fact sheets** with core messages for patients, residents, health professionals and support staff for the three settings: hospitals, community care and residential aged care.
- **Implementation guide** for hospital and residential aged care facilities that helps teams to optimise falls prevention practices in their facility. It provides information on data analysis, quality improvement and project management.

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<http://fallsnetwork.neura.edu.au>

Case Study – Mrs Sally Slips



- Mrs Sally Slips presented to her local hospital after a fall.
- She had substantial bruising and a # hip, & x-ray revealed no #
- Mrs Slips was admitted due to severe pain limiting her walking.

Case Study – Mrs Sally Slips



- In hospital Mrs Slips was screened at High Falls Risk – she had 3 falls in past 12 months
- She had impaired vision, some urinary frequency and difficulty with transfers and mobility
- A more detailed multidisciplinary assessment of falls risk was completed

Case Study – Mrs Sally Slips



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- After 2 days she was discharged home with a referral and management plan in place.
- Mrs Slips has been referred to you as a community health professional what would you do?