20th NSW FALLS PREVENTION NETWORK FORUM
PROGRAM
Friday 24 May 2013
Wesley Conference Centre

KEY FOCUS
Collaborative approaches to falls prevention

PLENARY SESSIONS
Wesley Theatre

CONCURRENT SESSIONS
The Lyceum - Dementia and falls
Smith Room - Exercise prescription for falls prevention
Wesley Theatre - Multidisciplinary approaches to falls prevention
NSW FALLS PREVENTION NETWORK

The NSW Falls Prevention Network has existed since 1993.

Purpose
The purpose of the NSW Falls Prevention Network is to:
• support a network of clinical and non-clinical people who have a role in falls prevention (e.g. health professionals, community and residential aged care providers, families and carers) by promotion of falls prevention as a key health issue
• provide falls prevention forums to highlight latest research evidence and falls prevention initiatives relevant to NSW Health facilities, other healthcare facilities and the wider community
• encourage collaborative projects, research and specific literature reviews that support translation of research into practice
• support the development of falls prevention best-practice models of care
• provide information on current State/Commonwealth issues in relation to falls prevention
• support activities that help increase public awareness about the risk factors and consequences of falls.

Goals
The goals of the NSW Falls Prevention Network is to:
• contribute to falls prevention and reduction in the incidence of preventable falls injuries among older people across NSW
• support consultation, cooperation and liaison between services, facilities and all key stakeholders
• support key falls prevention priorities for NSW and provide information and resources to support strategies for implementation
• promote and support research activities in relation to falls injury prevention.

Plenary presentations at this forum will be filmed and a CD produced for distribution. PDFs of presentations will be available on the NSW Falls Prevention Network website and notification will be made through the Falls Network listserv.

fallsnetwork.neura.edu.au

Exhibitors
# 20th NSW FALLS PREVENTION NETWORK FORUM

## PROGRAM

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<td>Ms Donna Ingram, Cultural Representative, Metropolitan Local Aboriginal Land Council</td>
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<td>PLENARY SESSION 1 - Wesley Theatre</td>
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<td>9.30 am</td>
<td>PAM ALBANY GUEST LECTURE</td>
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<td>Professor Lindy Clemson, Ageing, Work &amp; Health Research Unit, Faculty of Health Sciences, University of Sydney</td>
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<td>10.00 am</td>
<td>Falls Prevention Research: an update of the evidence</td>
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<td>11.00 am</td>
<td>Avoiding falls by using the environment to reduce confusion and agitation</td>
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<td>Professor Richard Fleming, Director, NSW/ACT Dementia Training Study Centre, University of Wollongong</td>
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<td>11.30 am</td>
<td>Fall-related hip fracture in NSW: Epidemiology, evidence, practice and the future</td>
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<td>Associate Professor Jacqueline Close, Senior Staff Specialist in Geriatric Medicine, Prince of Wales Hospital and Director, Falls and Injury Prevention Group, Neuroscience Research Australia</td>
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<td>12.00 noon</td>
<td>Celebrating 20 years: History of the NSW Falls Prevention Network</td>
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<td>Falls Prevention for people with dementia: Occupational Therapy interventions</td>
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<td>The Koori Dementia Project: some observations around mobility</td>
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<td>Falls prevention into the future</td>
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<td>New technologies for falls risk assessment and prevention</td>
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PLENARY SPEAKER ABSTRACTS AND BIOGRAPHIES

PLENARY SESSION 1

Pam Albany Guest lecture - this lecture honours the late Pam Albany, a passionate advocate for accident and injury prevention in her various work roles. She was the key facilitator for promoting evidence-based practice through the NSW Falls Policy and Falls Prevention Program and Network.

The 2013 Pam Albany Guest Lecturer is Professor Lindy Clemson an NHMRC Career Development Research Fellow from the Ageing, Work & Health Research Unit in the Faculty of Health Sciences, University of Sydney.

Avoiding program drift for positive falls outcomes - the Wisconsin experience

Falls prevention is complex and there is a need to understand the core components that influence both delivery and uptake of successful programs. I shall discuss the notion of maintaining program fidelity and its importance in widespread program implementation. Content knowledge and skills related to training in a particular preventive strategy is important but other factors such as enablement and behaviour change often underpin effectiveness. We want to ensure the same outcomes that the researchers achieve and prevent program drift which can occur when certain components of a program are not embraced. This can happen when we adapt or change the program or when we just reinvent components of the program. In reviews of fidelity implementation, feedback is an important component of implementation. I shall use the University of Wisconsin experience in dissemination research of the Stepping On program, a community-based falls prevention program to illustrate. This research included a Delphi consensus to determine program key elements, the use of Root Cause Analysis to examine fidelity issues and development of fidelity tools and processes. The tools were used to evaluate implementation of the program and an overall evaluation of the implementation across Wisconsin. Reflection, observation and feedback can be powerful tools to ensure good outcomes.

Lindy Clemson is Professor in Ageing and Occupational Therapy and an NHMRC Career Development Research Fellow at the Ageing, Work & Health Research Unit, The University of Sydney. She is also an investigator in the Centre of Excellence in Population Ageing Research. Professor Clemson is an occupational therapist with a PhD in epidemiology. Her specific focus is on the physical environment, functional capacity and adaptation, daily life activity and enabling participation. Her major research focus investigates falls prevention with older people and participation issues for people with dementia. She has conducted trials to test the efficacy of interventions, including Stepping On and LiFE, has developed assessments related to healthy ageing and participation and is interested in investigating ways to translate research into practice.

Contact email: lindy.clemson@sydney.edu.au

Professor Stephen Lord, NHMRC Senior Principal Research Fellow, Falls and Balance Research Group, Neuroscience Research Australia

Fall Prevention Research: an update of the evidence

This presentation will summarise findings from recent studies that have examined fall risk screens, fall risk factors and interventions for improving balance and preventing falls. Specifically the presentation will describe a) the validation for a new fall risk screen for residential aged care: the CaHFRI5 scale, b) the role dizziness plays in fall risk, c) the effectiveness of stepping and water exercises for improving balance control, and d) a lavender patch intervention for preventing falls in nursing homes. The presentation will conclude with a summary of the evidence provided by the two recent Cochrane Collaboration systematic reviews for studies undertaken in the community and hospital and residential aged care settings.

Stephen Lord is an NHMRC Senior Principal Research Fellow in the Falls and Balance Research Group at Neuroscience Research Australia. His research interests include the identification of risk factors for falls in older people and the evaluation of fall prevention strategies. He has published over 250 scientific papers, and co-written two editions of a research book Falls in Older People – risk factors and prevention strategies.

Contact email: s.lord@neura.edu.au
PLENARY SESSION 2

Professor Richard Fleming, Director NSW/ACT Dementia Training Study Centre, University of Wollongong

Avoiding falls by using the environment to reduce confusion and agitation

Dementia is a disease process which results in impairment of thought processes and memory, particularly short-term memory. Delirium (acute confusion) is a short-term state of confusion and agitation, usually as the result of an illness. The risk of falls increases dramatically when confused people find themselves in a new environment. The experience of being in a new or disturbing environment can cause agitation. The combination of confusion and agitation is a common reason for falls in hospitals and aged care facilities.

Over the last thirty years a body of knowledge on the design of environments that reduce confusion and agitation, particularly in people with dementia, has been developed. This information can be systematised under ten principles of design: unobtrusive safety, size, visual access, reduction of unhelpful stimulation, enhancement of helpful stimulation, provision for 'wandering', familiarity, range of engagement in social interactions, links with the community and domestic nature.

This presentation will introduce these principles and the evidence base for them. It will conclude with the description of tools that can be used to evaluate the quality of the environment.

Richard Fleming is the Director of the NSW/ACT Dementia Training Study Centre in the Faculty of Health and Behavioural Sciences, University of Wollongong. Richard is a psychologist. While occupying the position of Regional Coordinator of Mental Health Services in the South East Region of NSW, he played a major role in the de-institutionalisation of psychiatric services, by leading the design and development of the CADE units for the NSW Department of Health. Nine of these units for the Confused and Disturbed Elderly were built to replace services provided by psychiatric hospitals.

Between 1995 and 2010 he was the Director of the HammondCare Dementia Services Development Centre. While there he led a team that, amongst many other things, delivered training to 14,000 aged and health care staff under the Australian Government's Dementia Care Essentials programme and completed an Encouraging Best Practice in Residential Aged Care project focused on people whose behaviours cause concern.

In late 2010 he was appointed as a Professorial Fellow in the Faculty of Health and Behavioural Sciences in the University of Wollongong and as Director of the NSW/ACT Dementia Training Study Centre.

He has published papers on environmental design, reminiscing therapy, reality orientation, assessment of the elderly and service evaluation and is the principal author of books on care planning for people with dementia, environmental design and a comparison between Australian and Japanese dementia care.

Contact email: rfleming@uow.edu.au

Associate Professor Jacqueline Close, Senior Staff Specialist in Geriatric Medicine, Prince of Wales Hospital and Director, Falls and Injury Prevention Group, Neuroscience Research Australia

Fall-related hip fracture in NSW: Epidemiology, evidence, practice and the future

There are approximately 17,000 hip fractures in Australia each year of which about 6,000 occur in NSW. Recent work undertaken at State and National level suggests that there is variation in outcomes for these patients and that there are opportunities to enhance care for this often frail population so as to deliver better outcomes. National guidelines are in progress and should be available toward the end of 2013. In NSW, work initiated by the ACI Unwarranted Clinical Variation Taskforce is looking at developing standards of care for hip fracture patients in NSW. The anticipation is that the standards, including reporting of data, will improve care and outcomes for this population.

Jacqueline Close is a Senior Staff Specialist in Geriatric Medicine at the Prince of Wales Hospital where she runs the Falls, Balance and Bone Health Service and has Chaired the local Falls Advisory Group for 7 years. She is the Director of the Falls and Injury Prevention Group at Neuroscience Research Australia and Co-Chair of the NSW ACI Aged Health Network. Her academic areas of interest include falls and fracture prevention including understanding risk factors for falls and development of approaches to intervention in people with cognitive impairment.

Contact email: j.close@neura.edu.au
Associate Professor John Ward, Clinical Director and Geriatrician, Greater Newcastle Cluster, Hunter New England Local Health District

History of the NSW Falls Prevention Network

This short presentation will look back over 20 years of the NSW Falls Prevention Network, since its inception in 1993 as the Inter-Area Network for Falls Prevention Among Older people, and will outline the reasons for starting the network and some of the people involved in the early years.

John Ward is the Clinical Director for the Greater Newcastle Cluster in the Hunter New England Local Health District. He is a geriatrician, based in Newcastle. He is Clinical Director of the Greater Newcastle Cluster of Hunter New England Health and an Associate Professor of the University of Newcastle. His major interests are in the organisation of services for older people and people with chronic disease in the community and in residential care.

He is the convenor of the Sarcopenia Prevention Committee for the Hunter and has written a policy on the management of sarcopenic obese patients in hospitals for the Hunter New England Local Health District. Contact email: John.Ward@hnehealth.nsw.gov.au

CONCURRENT INTERACTIVE SESSION SPEAKER ABSTRACTS AND BIOGRAPHIES
1. Dementia and falls
   Facilitator: Ms Anne Cumming, Principal Policy Officer, NSW Dementia Policy Team, South Eastern Sydney Local Health District

Ms Morag Taylor, PhD student and Physiotherapist, Falls and Balance Research Group, Neuroscience Research Australia and Prince of Wales Hospital

Managing falls in older people with cognitive impairment

With population ageing, both dementia and fall-related injury pose an international health challenge. People with dementia fall twice as often as cognitively intact people and are more likely to have injurious falls. Higher morbidity and rates of mortality and institutionalisation after falls have also been reported in this group. There is limited but emerging literature that is attempting to define and explain why fall risk is increased in this population. This will allow for targeted fall prevention programmes. Currently there are no published randomised controlled trials that have prevented falls in community-dwelling cognitively impaired older people and conflicting evidence is reported in hospital and residential care trials. Recent exercise interventions have shown significant benefit such as improved gait speed, strength and balance in people with cognitive impairment/dementia, providing encouraging evidence for further research and clinical interventions.

Morag Taylor is a Physiotherapist at the Prince of Wales Hospital and a PhD student in the Falls and Balance Research Group Neuroscience Research Australia. Morag has been a physiotherapist for 14 years and has worked at the Prince of Wales Hospital in Aged Care Rehabilitation for 11 years. Morag has also been working part-time as a research physiotherapist examining falls in older people since 2005. More recently she has undertaken her PhD part-time investigating fall risk in cognitively impaired older people. The specific risk factors examined include demographic characteristics, medical history and medication use, as well as gait, neuropsychological, physiological and functional factors. To date she has five published manuscripts in this area and has presented her work nationally and internationally.

Ms Jacqueline Wesson, PhD student and Occupational Therapist, Dementia Collaborative Research Centre

Falls Prevention for people with dementia: Occupational Therapy interventions

The session will provide a brief synopsis of the evidence to date, and the OT component of the i-FOCIS falls prevention pilot study. Common interventions used with this group will be reported, and issues such as adherence and awareness will be discussed.

Jacqueline Wesson is an Occupational Therapist and PhD student at the Dementia Collaborative Research Centre and Sydney University. Jacqueline has experience across a range of clinical services, including over 10 years with the Memory Disorders Clinic, Prince of Wales Hospital. She has teaching experience at both undergraduate and post graduate levels. Specific interests include the application of the functional cognition (Allen's) model of practice to clarify client abilities and maximise function, and the role of occupational therapy in early memory loss. She recently conducted pilot research into falls prevention for people with dementia after a successful grant application with Alzheimer's Australia. Jacqueline is a current Dementia Collaborative
Ms Anne Axam, Project Coordinator TOP 5 - Patient Based Care, Clinical Excellence Commission (CEC)

**TOP 5 - What's this about?**
A short introduction to the TOP 5 concept and how the CEC is working with selected LHD's to improve the safety and quality of care provided to patients with dementia.

**Anne Axam is the Project Coordinator for the TOP 5 - Patient Based Care at the Clinical Excellence Commission.** Anne has a clinical background as a nurse in Intensive Care and Palliative Care. In management positions Anne has worked in three different healthcare systems that has provided valuable experience working with differing communities with a variance of resources.

For the past 12 years, Anne has focused on aspects of patient experience including safety and quality, incident management, open disclosure (including the management of serious complaints), Redesign and patient stories. In her current role in the Clinical Excellence Commission as the TOP 5 Project Coordinator, Anne has extended her knowledge of aged care, in particular dementia and this has provided valuable insight when working with clinical staff and carers involved in this patient based care initiative.

Ms Sharon Wall, Manager, Koori Dementia Care Project, Neuroscience Research Australia

**The Koori Dementia Project: some observations around mobility**
This short presentation aims to pull on the experience of the Koori Growing Old Well Study and The Koori Dementia Care project (particularly through the Aboriginal Dementia Knowledge Holders) to make some observations around mobility, falls and dementia in the Aboriginal population.

**Sharon Wall is the Project Manager of the Koori Dementia Care Project under the auspice of Neuroscience Research Australia.** As such she is committed to translating research related to dementia in Aboriginal and Torres Strait Islander populations into practice outcomes and capacity building with Aboriginal communities.

Sharon is an independent clinical gerontologist and undertakes many and varied assignments around ageing, specifically focusing on training and development and the development of good practice.

She has a demonstrated background in the care of people living with dementia and has an interest in advance care planning and advance care directives and is published in all of these areas.

She is a Knowledge Translation Consultant with the Dementia Collaborative Research Centre and has worked on translating research on pain in people living with dementia to training tools for those working in the area.

**2. Exercise prescription for falls prevention**

**Facilitator: Associate Professor Catherine Sherrington, Musculoskeletal Division, The George Institute for Global Health**

Ms Sally Castell, Physical Activity Co-ordinator, Northern Sydney Health Promotion, Northern Sydney LHD

**Creative ways with exercise programs in residential care**
Creative new ways of encouraging people to exercise and remain motivated whilst being 'true' to a basic format is a significant challenge that requires imagination and persistence.

This presentation will provide a base on which to build a falls prevention in a residential care setting and includes ideas which will help develop a variety of interesting and appropriate exercises.

**Sally Castell is the Physical Activity Coordinator for Northern Sydney Health Promotion.** Sally has over 40 years experience in the health/fitness industry. Currently she works part time as the Physical Activity Coordinator as well as running her own business.

She has been involved in many projects involving exercise and health promotion to address falls prevention for the older adult. A lot of her work is at the 'coal face' conducting classes for older adults in the community.
and residential care facilities as well as providing information/training workshops for allied health and fitness professionals. Sally's overall take home message is that exercise is possible and necessary for all ages and abilities.

Ms Jo Munro, Private Physiotherapist, LiFE program, Sydney University

**LiFE – Lifestyle Functional integrated Exercise Program to prevent falls**

LiFE is a new approach to exercise for Falls Prevention. A series of activities based on the principles of balance and strength training are embedded into the daily tasks and routines of the participants. The LiFE program is different to a traditional exercise program and may require a shift in thinking or focus for therapists. As therapists we look for ways of making activities EASIER for our clients or of having them do LESS. In LiFE participants are encouraged to look for ways to do more; more balance activities, more strength activities and ultimately more physical activity - all within their daily routine.

**Jo Munro is a Private Physiotherapist contracted by Sydney University to run the LiFE program.** Jo has a Masters of Health Science Education degree. She began work on the LiFE program at its inception and was involved in the implementation of the trial pilot program and the pilot program. Currently she is involved in writing the trainers manual for the LiFE program as well as being involved in the roll out of the program in Wisconsin, USA. She is primarily a clinician interested to see how this successful research can be moved into clinical practice.

Ms Renee Rabbitt, Manager, Otago Home Based Falls Prevention Program, Hunter New England LHD

**Otago Home Based Falls Prevention Program, Hunter New England LHD**

The Otago program is an evidence based falls prevention program. It is an individually tailored home based exercise program within the Greater Newcastle Cluster and functions as a complimentary service to the already existing suite of falls programs in the HNE LHD, including Stepping On. The program consists of leg muscle strengthening and balance retraining exercises. A walking plan is also incorporated in the program. The program takes 12 months to complete and participants are expected to exercise at least three times a week and walk twice a week. The Otago program incorporates home visiting as well as phone coaching to maintain participant's motivation and for confidence building.

**Renee Rabbitt is a Senior Occupational Therapist and the Otago Program Manager for Hunter New England Local Health District, Greater Newcastle Cluster.** She has a keen interest in falls prevention and falls injury prevention as well as exercise prescription. Renee has extensive experience in working with adults in the community with chronic disease looking at behaviour change and self-management as a key focus with this population.

3. Multidisciplinary approaches to falls prevention

**Facilitator: Professor Hylton Menz, NHMRC Senior Research Fellow, Lower Extremities and Gait Studies Program, Faculty of Health Sciences, La Trobe University**

Ms Stefanie Mikolaizak, PhD student and Physiotherapist, Falls and Injury Prevention Group, Neuroscience Research Australia

**A new model of care: falls prevention following non-transportation after ambulance callout**

**Background:** An increasing number of falls result in a ‘triple zero’ emergency call and the subsequent dispatch of an emergency ambulance. Up to 25% of fallers are subsequently not transported to hospital and it is likely that non-conveyed older fallers have the potential to benefit from timely access to fall risk assessment and intervention. The aim of this randomised controlled trial is to evaluate the effect of a timely and tailored falls assessment and management intervention using on the number of subsequent falls and fall related injury for non-transported older fallers.

**Methods:** Community dwelling people aged 65+ years who are not conveyed to hospital following a fall will be eligible to be visited at home by a research physiotherapist. Participants in the intervention group will receive individualised pro-active falls prevention strategies from the clinical researcher.

**Discussion:** As there is currently little evidence regarding the effectiveness or feasibility of alternate models of care following non-transportation of older fallers, there is a need to explore assessment and intervention programs to help reduce subsequent falls, related injuries and subsequent use of health care services.
Stefanie Mikolaizak is a PhD student and Physiotherapist in the Falls and Injury Prevention Group at Neuroscience Research Australia. Stef has been working as research physiotherapist with Stephen Lord at Neuroscience Research Australia since 2007. Prior to working in research she worked as a clinical physiotherapist in an out-patient setting in Germany.

During her time at NeuRA, Stef has been involved in various research projects investigating falls risk factors in community dwelling elderly as well as cognitively impaired older adults. Further she has worked on projects testing the effectiveness of physical therapy and group exercise therapy as a mean to reduce falls risk and falls.

Stef is her 3rd year of her PhD. Her PhD aims to test a new model of care offered to elderly fallers, who call an ambulance due to a fall but are not transported to hospital. The objective is to see, whether a rapid, tailored and interdisciplinary falls prevention program is able to alter individual falls risk factors in this high risk population.

As the PhD is a large RCT, there are currently only baseline data available with all follow-up outcome measures being collected by a blinded researcher. Therefore Stef will be focusing on the interdisciplinary work involved in this project.

Ms Nerimah Hickford, Dietitian, Northern Sydney Local Health District

Wasting away on tea and toast

Nutrition should be an essential part of any falls prevention assessment. In this presentation, we look at common nutritional issues facing our clients, how to assess for risk and basic strategies that you can implement to encourage better nutrition.

Nerimah Hickford is a dietitian with the Northern Sydney HACC Dietetic service which consists of Accredited Practising Dietitians (APD) who provide a home visiting service for the frail elderly and younger persons with disabilities. This has enabled them to develop a range of experiences, tools and skills to address nutritional issues and collaborating with community services. They also run regular workshops, staff inservices and community presentations to promote the role of nutrition and up skill the workforce. They are also regular presenters at the ‘Stepping On’ falls prevention program and have recently presented at the NSLHD Falls Prevention Seminar.

Ms Jenny Blennerhassett, Pharmacist, Community Health Service, Prince of Wales Hospital

Medications, falls and multidisciplinary teams

A falls prevention program was established at Community Health, Prince of Wales Hospital, in 2001. The objectives were to apply a uniform approach to the identification and management of falls risk factors and to increase clinician (allied health, nursing and Aboriginal Health workers) knowledge about falls. Resources and tools were developed, implemented, tested and reviewed. Based on audit, evaluation, further review and education, a standardised action plan, resulting from identified falls risks, including medication risks, was implemented.

Jenny Blennerhassett is the Pharmacist with the Community Health Service at Prince of Wales Hospital.

Jenny has been the pharmacist for the Community Health Service at Prince of Wales Hospital for 13 years, having previously been employed in community pharmacy and acute hospital settings. Her role is centred on medication management, liaison and continuity of care. Health promotion and education are important functions in the context of multidisciplinary teams, Quality Use of Medicines and the community.

She has been a member of the multidisciplinary falls prevention committee at Community Health for more than 10 years.
NEW RESOURCES

Video - Staying active and healthy to prevent falls – Home based strength and balance exercises

Ms Noeline Brown, the Australian Government Ambassador for Ageing introduces this video commenting on the importance of staying active and healthy and encouraging people to undertake ongoing exercise. A physiotherapist explains balance and strength exercises that can be done at home with two older people demonstrating these exercises. The final section is a physiotherapist demonstrating how these exercises can be incorporated into daily life, developed through the LiFE (Lifestyle Functional Exercise Program) program. The video can be accessed at: http://www.activeandhealthy.nsw.gov.au

Power point presentations for hospital and community care staff

Generic power point presentations have been developed by the CEC for use by hospital and community care staff. They provide an overview of falls risk factors and prevention strategies based on best-practice for each of the care settings. These presentations can be viewed on the NSW Falls Prevention Network website in PDF at: http://fallsnetwork.neura.edu.au

Patient /family /carer falls prevention information

CEC Falls Prevention – one page flyers for patients, carers and families, provide information on falls risk factors and complement the Staying active and on your feet booklet. Some have been translated into Greek, Italian, Simplified Chinese, Traditional Chinese, Vietnamese and Arabic.


Further information can be found at:


NSW Falls Prevention Network: http://fallsnetwork.neura.edu.au

Active and Healthy website: http://www.activeandhealthy.nsw.gov.au
ACKNOWLEDGEMENTS

We would like to thank:

- Dr Jo Mitchell, Acting Director, Centre for Population Health, NSW Ministry of Health
- The Centre for Population Health, NSW Ministry of Health
- NSW Falls Prevention Program, Clinical Excellence Commission
- Staff from the Falls and Balance Research Group, Neuroscience Research Australia (NeuRA)
- Photography: Anne Graham, Communications Manager, Neuroscience Research Australia

Exhibitors:
- Active Mobility, Alzheimer's Australia NSW, Arthritis NSW, Ausmedic, Invisa-Beam International, Osteoporosis Australia (NSW), Prius Healthcare Solutions, Statina Healthcare Australia, Vision Australia, VitalCall

NSW Falls Prevention Network Advisory Group:
- Lorraine Lovitt (chair), Leader, NSW Falls Prevention Program, Clinical Excellence Commission
- Ingrid Hutchinson, Project Officer, NSW Falls Prevention Program, Clinical Excellence Commission
- Anthony Best, Physiotherapist in Charge, Port Macquarie Base Hospital, Mid North Coast LHD
- Kathy Bullen, DON/Service Manager, Rankin Park Centre, Hunter New England LHD
- Sharon Butler, Better Balance Leader, Anglican Retirement Villages
- Sally Castell, Physical Activity Coordinator, Northern Sydney Health Promotion, Northern Sydney LHD
- Dr Tai-Tak Wan, Medical Director, Ambulatory Care, Fairfield Hospital, South Western Sydney LHD
- Catherine Leys, NUM Narrabri Community Health, Hunter New England LHD
- Merrin Moran, Physiotherapist, Aged Care Services, Wagga Wagga, Murrumbidgee LHD
- Bharat Nepal, Health Promotion Officer, Falls Injury Prevention Team, South Eastern Sydney LHD
- Kirsty Stapylton, Occupational Therapist, Broken Hill Health Service, Far West LHD
- Amber Gunn, Physiotherapist, Orange Health Service, Western NSW LHD
- Dr Anne Tiedemann, Research Fellow, Musculoskeletal Group, The George Institute for Global Health
- Professor Stephen Lord, NHMRC Senior Principal Research Fellow, NeuRA
- Dr Esther Vance, Project Officer, NSW Falls Prevention Network, NeuRA

Falls Prevention Coordinators:
- Margaret Armstrong - Northern Sydney and Central Coast Local Health Districts
- Kitty Kaur - Western Sydney Local Health District
- Alejandra Martinez - Nepean Blue Mountains Local Health District
- Sharon May - South Sydney Local Health District
- Leeanne Reid - South Eastern Sydney Local Health District
- Joanne Luke - Illawarra Shoalhaven Local Health District
- Paul Bennett (Contact) - Sydney Local Health District
- Patsy Bourke - Hunter New England Local Health District
- Niccola Follett - Southern NSW Local Health District
- Nazmul Ahasan - Murrumbidgee Local Health District
- Mary-Clare Maloney - Northern NSW Local Health District
- Ros Tokley (Contact) - Mid North Coast Local Health District
- Shelley Moor - Western NSW and Far West Local Health Districts

fallsnetwork.neura.edu.au