Falls Prevention in Older People: Policy and Practice

Professor Stephen Lord
Prince of Wales Medical Research Institute
Sydney, Australia
### Falls prevention - What works?

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Community populations</th>
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<tbody>
<tr>
<td>Balance and strength training in high risk populations *</td>
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<td>Group exercises with functional balance exercises and Tai Chi *</td>
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<td>Occupational therapy interventions in high risk populations *</td>
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<td>Expedited cataract surgery *</td>
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<td>Withdrawal of psychoactive medications *</td>
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<td>Cardiovascular assessment and intervention in unexplained fallers *</td>
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<td>Multidisciplinary assessment of high risk populations *</td>
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<td>Comprehensive geriatric assessment in nursing homes</td>
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<td>Targeted interventions in hospitals</td>
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* Community populations
Policy development in Australia

- In 1993, falls injury prevention was identified officially as an Australian health priority.
- This initiative resulted in:
  - significant advances for research via priority funding of grants
  - policy development at both the Commonwealth and State levels
- Importantly, policy makers could draw upon the large and growing research evidence base.
In 1999, the Australian Government announced its National Falls Prevention for Older People Initiative.

Since then over $18 million has been allocated to programs aimed at identifying best practice in falls prevention.
National Falls Prevention for Older People Initiative - aims

- extending the evidence base through research
- facilitating evidence-based best practice in falls prevention in the community, residential aged care and acute care settings
- increasing awareness of falls and interventions among stakeholders
- enhancing access to fall prevention information, strategies and activities for stakeholders
National Falls Prevention for Older People Initiative - aims

- building falls prevention capacity through workforce development
- building partnerships among stakeholders interested in falls prevention in older people
- incorporating falls prevention messages into a broad range of health policies
Falls policy initiatives

Management Policy to Reduce Fall Injury Among Older People

Policy in Brief 2003-2007

Statewide Action Plan

Falls Prevention in Older People 2002 - 2006
Minimising the Risk of Falls & Fall-related Injuries
Guidelines for Acute, Sub-acute and Residential Care Settings

Quick Reference Guide
Best practice guidelines for Australian hospitals and residential aged care facilities, 2005

Quick reference guide to Preventing falls and harm from falls in older people.

Implementation guide for Preventing falls and harm from falls in older people.

www.powmri.edu.au/fallsnetwork
Australian Council on Health Care Standards (ACHS)

- Established in 1974
- A not-for-profit organization funded by membership fees
- Covers 67% hospitals, 87% hospital beds, some residential aged care facilities
- 4 year accreditation process with independent surveyors
Evaluation and Quality Improvement Program (EQuIP): ACHS standards

- LA - Little Achievement
- SA - Some Achievement
- MA - Moderate Achievement
- EA - Extensive Achievement
- OA - Outstanding Achievement
The incidence of falls and fall injury is minimised through a **falls management** program.

<table>
<thead>
<tr>
<th>Criterion</th>
<th>LA</th>
<th>SA</th>
<th>MA</th>
<th>EA</th>
<th>OA</th>
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<tbody>
<tr>
<td>(a) A policy and guideline exist for preventing falls and fall injury.</td>
<td>(a) The falls policy is implemented across the organisation.</td>
<td>(a) Falls and fall injury prevention data are analysed and improvements made to ensure better practice.</td>
<td>(a) Falls data management programs are compared internally and externally and improvements are made to achieve better practice.</td>
<td>(a) The organisation is recognised a leader in the areas of falls prevention and management.</td>
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<td>(b) Consumers / patients are assessed for risk of falls:</td>
<td>(b) The organisation uses a validated risk assessment tool to identify consumers / patients at risk of falls.</td>
<td>(b) The falls and falls injury prevention and management education program is evaluated and improvements made.</td>
<td>(b) Falls management improvement program is communicated to other health care communities.</td>
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<td>(a) on admission and</td>
<td>(c) An individual falls management plan addresses the falls risk factors identified in the assessment</td>
<td>(c) The organisation undertakes research into falls prevention and falls injury prevention.</td>
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<td>(b) on a change of health status</td>
<td>(d) Falls and fall injury prevention equipment is accessible for consumers / patients.</td>
<td>(d) There is demonstration of program effectiveness through outcomes and sustainability of those outcomes.</td>
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<td>(c) after a fall.</td>
<td>(e) Falls risk is considered as part of discharge planning for high risk patients.</td>
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<td>(c) Falls prevention information is provided to staff / consumers / patients</td>
<td>(a) Staff are educated on falls and falls injury risk assessment, prevention and management.</td>
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<td></td>
<td>(b) Consumers / patients are involved in the management of falls risk.</td>
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Welcome to the first edition of the newsletter of the newly established Injury Prevention Network.

**Falls Injury Prevention Networks**

**Falls Injury Prevention Network**

**Welcome**

Welcome to the first edition of the newsletter of the newly established Injury Prevention Network. This newsletter includes a review of the operations and regulations, as well as a list of recent hospital injury prevention initiatives. It also provides information on upcoming meetings and conferences.

**Falls Links**

**NEW WEBSITE COMING**

The current NSW Falls Injury Prevention Network website at NSW Health will be updated and hosted at POMSA. This newsletter will also be accessible on the new website. Until this new website is launched, the current website can be accessed at [http://www.health.nsw.gov.au/social-health-falls_prevention/index.html](http://www.health.nsw.gov.au/social-health-falls_prevention/index.html)

From Research to Practice
21-23 November 2004  Manly, Sydney, Australia

It is my pleasure to invite you to attend the inaugural Australian Falls Prevention Conference, to be held at the beachside Manly Pacific Hotel, Sydney, Australia.

The conference will address the important issue of falls in older people and have a major emphasis on translating research findings into practice. It includes six keynote speakers from Australia and abroad, free papers, poster sessions, workshops, roundtable discussions and trade exhibitions. The Organising Committee looks forward to welcoming you to Sydney.

Call for Abstracts ..................... 2 February 2004
Registration Open ..................... 1 March 2004
Abstract Deadline ..................... 2 July 2004
Notification of Acceptance ........... 3 September 2004
Early Registration Deadline ......... 17 September 2004

Important Dates

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- Call for abstracts ..................... 2 February 2004
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Keynote Speakers
- Dr. Martin Sluiter (Nijmegen, The Netherlands) “Prevention of falls in Parkinson’s disease”
- Professor John Campbell (Queensland, Australia) “Falls prevention: from risk factors to public programs”
- Dr. Jacqueline Cloke (London, UK) “PROSPER: 5 Years On: Implementation, Implications, Integration and Innovation”
- Professor Gillian Curren (Sydney, Australia) “Prevention of fractures in older people: an overview of the evidence”
- Dr. Keith Hill (Melbourne, Australia) “Translating the evidence where there is none: hospital in and outpatient settings”
- Associate Professor Stephen Lord (Sydney, Australia) “Evidence-based overview of strategies to modify falls risk”

Scientific Committee
- Dr. Martin Sluiter, Dr. John Campbell, Dr. Gillian Curren, Dr. Keith Hill, Dr. Graham Kerr, Dr. Stephen Lord

Organising Committee
- Ms. Lesley Allen, Ms. Andrea Eves, Dr. Graham Kerr, Ms. Margaret Thomas

Session Themes
- Understanding balance and mechanisms of falls
- Falls epidemiology
- Falls risk assessment
- Risk factors for falls
- Falls in clinical groups
- Preventing falls
- Exercise programs
- Assistive devices
- Compliance issues
- Fracture prevention
- Falls prevention initiatives
- Falls policy development

Invited Speakers
- Lindy Clemson (Sydney, Australia) “Occupational interventions for the prevention of falls”
- Bob Cunning (Sydney, Australia) “Interventions for preventing falls in hospitals”
- Stephen Lord (Sydney, Australia) “Overview of 50 RCTs on exercise for falls prevention”
- John Worrall (Melbourne, Australia) “An update of fracture prevention strategies”
- Graham Kerr (Brisbane, Australia) “Falls prevention strategies for people with Parkinson’s disease”
- Clare Robertson (Dunedin, NZ) “Falls prevention strategies for people with visual impairment”
- Jacqui close (Sydney, Australia) “Falls prevention strategies for people with cognitive impairments”

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Website: www.powmt.edu.au/AFP2004
Email: a.buller@unsw.edu.au


5-7 November 2006 - Brisbane, Queensland

It is my pleasure to invite you to attend the second Australian Falls Prevention Conference, to be held at the Sofitel Hotel, Brisbane, Queensland. The conference will address the important issue of falls in older people with a major emphasis on...

“Preventing falls in at-risk groups”

The conference includes 7 keynote speakers from Australia and abroad, free papers, poster sessions, workshops, roundtable discussions and trade exhibitions. The Organising Committee looks forward to welcoming you to Brisbane.

Graham Kerr, Conference Host.

Important dates
- Call for abstracts ..................... 10th February 2006
- Registration open ..................... 27th February 2006
- Abstract deadline ..................... 30th June 2006
- Notification of acceptance ........... 1st September 2006
- Early registration deadline ......... 15th September 2006

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- Lindy Clemson (Sydney, Australia) “Occupational interventions for the prevention of falls”
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Website: www.powmt.edu.au/AFP2006
Evidence-based practice?

- Sloppy slippers
- Gentle and seated exercise
- Ad hoc home modifications
- Glow in the dark toilet seats

H.L. Mencken:
For every complex human problem there is a solution - simple, neat and wrong
Conclusions

- There has been significant progress in understanding falls risk factors and determining the efficacy of falls prevention strategies.
- Policy makers have appreciated:
  - the value of this evidence, and
  - the need for developing services and preventative programs to deal with anticipated increases in falls injury due to population aging.
- This has led to policy and guideline development and facilitation of translating research findings into practice.