NSW management policy to reduce fall injury among older people

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Fall injury in older people

- Total lifetime cost of falls $644 million ($333 million direct costs & $311 million mortality & morbidity costs) in NSW

- Estimates that 1 in 3 people > 65 years in community will fall each year: 30% will require medical attention and 10% will have multiple falls

- Falls are the leading cause of injury in hospitals and hospital incidences related to falls. A serious fall frequently becomes the precipitating event into residential care
NSW Health Projected Costs 2050

- Falls
- Road trauma
- Violence
- Self harm
Projected bed day demand
Drivers – Policy and Guidelines

**NSW Health**

*Management Policy to Reduce Fall Injury Among Older People*

- To reduce the burden of fall injury among older people in NSW

**Department of Health and Ageing**

*National Falls Prevention for Older People Plan: 2004 onwards*

- To support a nationally consistent approach to effectively preventing falls
Preventing falls and harm from falls in older people.

Best practice guidelines for Australian hospitals and residential aged care facilities.

2005

Support materials

- Quick reference guide
- Implementation guide
- Short film
- Fact sheets
- Poster
- Indigenous resources and brochures
Factors associated with falls

- Advanced age
- Female
- Living alone
- Inactivity – lack of exercise
- Activity of Daily Living limitations – ability to dress, prepare meals
Medical factors

- **Medications:**
  - use of 4 or more
  - use of sedatives and anti-depressants
- Memory problems/confusion/dementia
- Depression
- Stroke
- Incontinence
- Acute illness
- Parkinson’s Disease
- Foot Problems
Factors associated with falls

VISION
• macular degeneration/cataract
• ability to see detail such as signs and the edges and borders or contrast between light and dark
• adaptation to the dark

Other
• Reduced peripheral sensation
• Muscular weakness
• Poor reaction time
Balance and Mobility Factors

- Stability when standing
- Stability when leaning and reaching
- Gait and mobility (walking)
- Ability in standing up
- Ability in moving from chair/bed
Environmental factors

- Footware
- Poor lighting, clutter
- Equipment clutter- wheelchairs, walking frames
- Hazards in public places – uneven pathways, slippery surfaces, gutters too high.....

- Limited staffing and supervision
NSW Falls Program

AIM:
Reduce fall injury in older people and fall related admission to hospital

HOW:
Implementation of a range of strategies that work across community, hospital and residential care settings
NSW Health Investment

- Policy launch July 04 - $8.5 million over 4 year with recurrent thereafter
- Area Falls Co-ordinator in each Area Health Service to implement a falls prevention plan

Improve service systems for people at risk of falling
Generate a low risk population

Goal 1. Increase resistance across all ages

Reducing fall injury among older people

Goal 2. Community
Goal 3. Residential
Goal 4. Acute/Subacute care

Improving outcomes through partnerships

Goal 5. Local needs
Goal 6. Delivery Systems

Improve outcomes

Develop & manage knowledge

Goal 7. Research
Goal 8. Evaluation
Goal 9. Training
Goal 10. Workplace safety
Goals

- Develop pro-active approaches to fall injury
- Address the environments in which people live
- Optimise the mix of preventive and treatment responses
- Improve service systems for people at risk of falling
- Conduct research on which to base interventions
- Monitor and evaluate fall injury prevention and intervention strategies
Community initiatives

• **Partnerships with other agencies** – for further exercise programs with a focus on strength, flexibility and balance training.

• **Identification (screen/assess) and management of people with early risk factors** by GPs, Community Health Teams, Community Service Providers, NSW Ambulance Service - **SAFTE pilot** referral & care for people at home

• **Referral process** developed to a network of suitable programs and support in each local area

• **Promotion** of community information on benefits of physical activity that promotes independence.
Community initiatives

• Partnership with other agencies
  • health promotion - LGO, NGOs, fitness organisations, local service orgs
  • Fitness associations - curriculum development and training
• The 4 yr “Stay on Your Feet” community based falls prevention program trial on North Coast Area Health Service delivered:
  20% reduction in fall related admissions to hospital at a cost benefit ratio of 20.6:1.
Hospital initiatives

- Identification Screen in ED, on admission to ward
- Assessment Falls Risk

- Management of people with a falls risk/had a fall
- Reporting and monitoring of fall incidence and fall injury
Hospital initiatives

Management of a persons FALLS RISKS

- Mobility and transfers - need for supervision, wearing of non-slip socks
- Medication review
- Medical review
- Incontinence - regular toileting
- Cognition - assess for delirium
- Vision/hearing
Hospital initiatives

Identify environmental risk factors

• Lighting - night lights/glow in the dark
• Bed height - non slip mats beside bed
• Mobility aids
• Clutter

Call bell within reach
# Falls Risk Identification by Colour

<table>
<thead>
<tr>
<th>Area Health Service</th>
<th>Colours</th>
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<tbody>
<tr>
<td>HNEAHS Hunter New England</td>
<td>Public Hospitals and Residential care facilities</td>
</tr>
<tr>
<td>NSCCAHS Northern Sydney</td>
<td>Public and Private Hospitals Baptist Community Services</td>
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<tr>
<td>SESIAHS South Eastern Sydney</td>
<td>Sutherland</td>
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<tr>
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<td>GSAHS Greater Southern</td>
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Hospital initiatives

- **Implementation of best evidence guidelines** (Australian Safety and Quality Council, 2005), education of hospital staff & distribution of good practice tips to hospital
- **Show case good models of practice** eg Hornsby Hospital: Acute Care of the Elderly Unit (ACE), Mobility Enhancement Program; Broken Hill Hospital Falls Prevention program; St George, Volunteers sitters program (increase surveillance), Liverpool 'Falls Room'
- **Review of IMMS Falls incident data** at ward level
Residential care

- Implementation of best practice guidelines
  - DOHA education initiative
- NSW Ambulance Service data - transfers to hospital
- Local networks with residential care
- Accreditation Agency - Falls monitoring
State-wide implementation

NSW Leader Falls Program
Clinical Excellence Commission

Manager, Injury Prevention Policy Branch
NSW Department of Health

expert Advisory Groups

Injury Risk Management Research Centre (IRMRC)
University of NSW
(Monitoring and Evaluation)

NSW Department of Health
- Health System Performance – Quality & Safety
- Inter-Government & Funding Strategies – Aged Care Integration
- Asset & Contract Services

Falls Injury Prevention Network
Prince Of Wales Medical Research Institute
(Project Officer)

NCAHS Falls Co & AFMC*
NSCCAHS Falls Co & AFMC*
HNEAH Falls Co & AFMC*
SESIAHS Falls Co & AFMC*
SSWAHS Falls Co & AFMC*
SWAHS Falls Co & AFMC*
GSAHS Falls Co & AFMC*
GWAHS Falls Co & AFMC*

Falls Injury Prevention Network

Prince Of Wales Medical Research Institute
(Project Officer)
Area Health Service implementation

- Clinical Governance Unit
- Population, Planning and Performance Unit
- Clinical Operations

Consumer Groups, NGOs and LGOs

Area Falls Coordinator

Area Sub working groups
- Acute, Community, Residential Care

Area Falls Management Committee
Monitoring and Evaluation

NSW Injury Risk Management Research Centre (IRMRC)

Monitor

- Contracted to establish falls injury indicators for NSW and performance indicators relevant to policy implementation

Evaluation

Contracted to develop an evaluation framework

NSW Health (Quality and Safety Unit) and CEC

Monitor and Reporting

Incident Information Management System (IIMS)
Accountability

Accountability of Area Health Chief Executive

- Performance Agreements
  - Develop a Area Falls Implementation plan
  - Appoint Area Falls Coordinator and Area Falls Management Committee
  - Falls funding directed to appropriate services
  - AHS Specific Population Health Falls Dashboard Indicator Targets (05/06)
    - Hospital falls Dashboard Indicator
  - Population health indicators
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NSW Falls Prevention Injury Network
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What matters is what works

Late 20th century saying!