

2020 NSW FALLS PREVENTION NETWORK SURVEY REPORT

An online survey was prepared using Survey Monkey to obtain feedback from members of the NSW Falls Prevention Network on the activities and resources provided by the network and to seek suggestions for further information, resources and activities that they would find helpful in their falls prevention roles. The survey questions are attached to the end of this report. The survey was circulated on the Falls Network email list in June and responses collected until end June 2020. A total of 138 responses were collected from a network membership of about 1900.

EXECUTIVE SUMMARY

This survey of 138 members of the NSW Falls Prevention Network found that the network provides a range of activities and information resources that are invaluable in the day to day practice of clinicians caring for older people and that it reaches professionals working in all Local Health Districts in NSW in a diverse range of roles and work settings.

The network has diverse membership and this was evident in the respondents to the survey with 49.3% working in Allied Health (Physiotherapy, Occupational Therapy and Exercise Physiologists), followed by Nursing (17.4%), Health Promotion Practitioners (5.8%), Falls Prevention Coordinator (5.1%), Physical Activity Providers (5.1%), Researchers (5.1%), Health Managers (4.4%), Medical Practitioners (1.5%) and Other (5.8%).

Network members work in a variety of settings and 36.2% in Community Health, 34.7% respondents worked in the Public Hospital or MPS, 7.1% in the private sector or self-employed, 6.3% in University or Research Institute, 4.7% in Residential Aged Care and 9.5% Other.

All Local Health Districts in NSW were represented by 88% of survey respondents, with the rest from Interstate and overseas.

Barriers to falls prevention reported by respondents included availability of resources and funding, issues of patient compliance and motivation, staffing and skill levels, and falls prevention not seen as a priority in their LHD.

The most effective mechanism to reach respondents with falls prevention information and updates was through the email list as well as the website and the e-newsletter.

Most respondents (74%) indicated that the website easy to navigate provided sufficient information and resources and did not require any improvements. Suggested improvements included: being more user-friendly, improved layout, more information on Stepping On, strategies and recommendations to go with presented evidence, the addition of more CALD community information.

Over 85% of respondents indicated they were satisfied or very satisfied with the following activities provided by the NSW Falls Prevention Network; Falls Links e-Newsletters, Falls Network website, communication on the email list, Falls Network meetings and forums and webinars.

A range of topics were suggested for mini-reviews including some that have already been published

on the website and in the e-newsletter highlighting the importance of circulating these mini-reviews more widely.

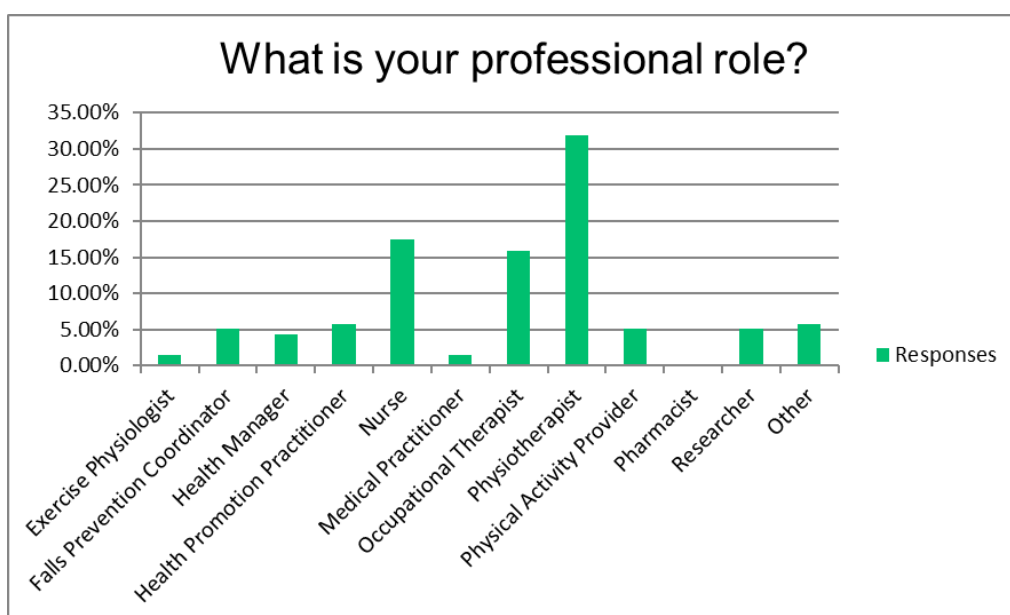
Respondents provided suggestions for resources and improvements to the website including; more webinars and CPD options, research updates, videos and information on basic daily exercises, more resources translated to other languages.

An on-line survey response does have its limitations and many members may not access their emails or have on-line access to respond.

SURVEY SUMMARY

The majority of respondents worked in Allied Health (44%). Respondents' professional roles included:

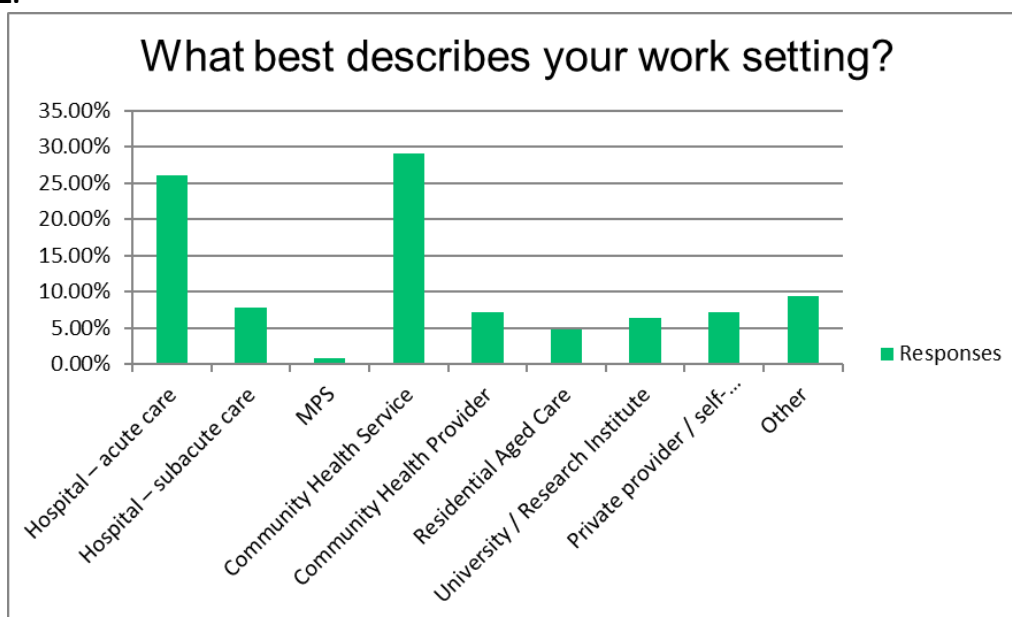
Figure 1.



Other professional roles included podiatrist, student, allied health assistant and clinical nurse consultant.

The work settings of the respondents included:

Figure 2.



The other category included: Community Mental Health, Primary Health Network, State Government, Stepping On Provider and NSW Ambulance.

Respondents workplaces included all Local Health Districts in NSW (total 83.3%), not for profit organisations and the private sector in NSW, as well as interstate and overseas locations.

The main barriers around falls prevention faced by respondents are listed in Table 1.

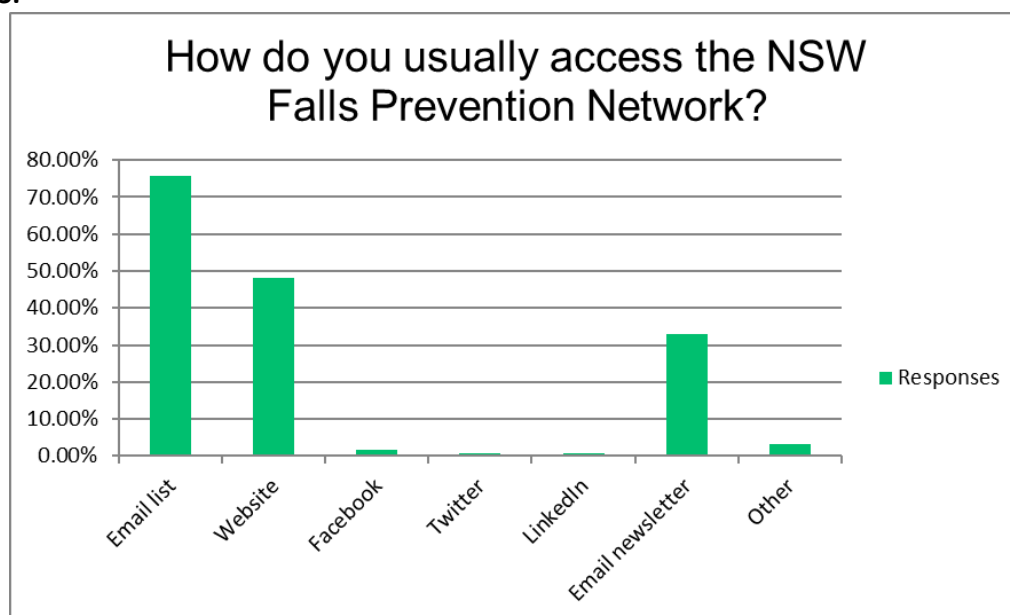
Table 1

Barrier	% Respondents
Resources & Funding	19.4
Patient Compliance & motivation	12.6
Staffing levels	10.6
Not seen as Priority by management or staff	9.7
Staff skill levels	8.7
Patients with cognitive impairment	7.7
Lack of follow up and/or referral	6.8
Transport to classes	5.8
COVID-19	5.8
Lack of time	4.8
Cultural and Linguistically Diverse Community	3.8

Other issues and barriers around falls prevention included: staff lack of awareness, support for community staff, need for more translation of research to practice, access to Stepping On groups, rural issues, patient knowledge and education, dealing with confused patients and frail elderly.

The usual way that respondents accessed the NSW Falls Prevention Network included:

Figure 3.



Other ways included attending falls forums and webinars.

The website was found to be easy or very easy to navigate by 74% of respondents. The information that respondents looked for on the website is summarised in Table 2.

Table 2

Information on website	% respondents
Research Information	21.5
Information on events and courses	21.5
Falls Prevention Resources	16.1
Falls prevention flyers/handouts	10.1
Webinars	8.7
Guidelines	7.4
Physical activity information	6.7
Presentation slides and recordings	4.7
News	3.4

Other information that respondents looked for on the website included CALD resources, April Falls information, mini-reviews, contacts and a place to ask questions.

Respondents were asked about improvements to the NSW Falls Network website, 69% of respondents indicated none or no improvements were required and the website was very clear up to date and with good graphics. Suggestions to improve the website included:

- Having handouts for patients
- Simplify the text with icons
- Update the appearance of the website – more contemporary
- Increase the resources
- Improve navigation
- Add Q & A section
- More research
- Stepping On section

Respondents provided suggestions for mini-reviews and these are summarised in Table 3.

Table 3

Mini review topic	% Respondents
Cognitive impairment and falls	15.8
Medications and falls	2.6
Vision and falls	10.5
Dizziness and falls	10.5
Tele-health and fall prevention programs	5.3
Mental health and falls	5.3
Sarcopaenia and falls	5.3
Tai Chi for falls prevention	5.3

A mini-review on Tai Chii and falls was completed in 2014 as well as vision and falls in 2017, this highlights the importance of circulating information on these reviews beyond the e-newsletter

Other suggestions for mini-reviews included: recommended physical activity programs, mechanism of falls in chronic diseases (diabetes, stroke, Parkinson's Disease), dancing and falls, falls in residential aged care and peripheral neuropathy and falls.

Respondents provided suggestions on information and resources around falls prevention they would find helpful and other suggestions to improve the NSW Falls Prevention Network and its activities. These are summarised in Table 4.

Table 4

Suggestions for resources and improvements	% Respondents
More webinars	24
Videos on fall risk topics	12
Involve consumers more	8
Exercise resources	8
CDP options	8
Promote local programs	8
Evidence based studies	8
Resources for CALD communities	4

Other suggestions included: improved communication, resources for health professionals, increased social media presence, more information on Stepping On.

In conclusion, the majority of respondents were satisfied with the activities and information provided by the NSW Falls Prevention Network and would like to see the continued provision of these activities and updates of information. The suggestions provided by respondents will be incorporated into the ongoing update of the NSW Falls Network website and activities of the network.