

CONFERENCE ABSTRACT

A Multi-disciplinary approach to falls prevention in the elderly

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Northern Ireland South Eastern Integrated Care Partnership – Multi-agency Falls Prevention Strategy

Background:

Falls are the most frequent and serious accident in people over 65.

Falls are the MAIN cause of disability & death in people over 75.

FEAR of falling dramatically reduces quality of life

Strokes/TIAs and heart attacks are falling.

Fractures from falls are RISING.

Fragility fractures cost UK over £2billion/year.

Large and rising elderly population

Preventing Falls: NICE (2013) recommend that all older people who have had a fall or are identified as having gait or balance problems should have a multifactorial falls assessment and a multifactorial intervention plan. NICE have identified the following interventions as being common to successful multifactorial interventions:

Strength and Balance training – shown to reduce Falls by 55%

Home hazard assessment and intervention

Vision assessment and referral

Medication review with modification/withdrawal

Implementation of evidence base requires a multi-professional and multi-agency approach to care provision and raised awareness among public and professionals.

SE ICP Falls Multi-professional working group/partnership committee membership

Patient & Carer representatives

Falls Co-ordinator

Community/voluntary representative

Local Council representative

Physiotherapists

OTs

GPs

Pharmacists

NIAS (Northern Ireland Ambulance Service)

ICP Project Manager

Problems Identified: Lack of Follow up of patients who fall and call NIAS (N.I. Ambulance Service) Poor Access to Falls Prevention Services/ Strength & Balance Programmes

Lack of Awareness of benefits of Fall Prevention Services Strength & Balance Programmes

Actions: 12 month pilot to provide a co-ordinated Falls service across the entire south eastern locality in conjunction with NIAS (5 day and enhanced weekend service). Referrals made directly from NIAS to the service and all patients referred receive a multifactorial screening assessment by a Falls Assessor in their own home within 24hrs of a fall. If necessary onward referrals made to AHP, nursing, GP and voluntary sector services to address identified need. Patients also receive a medication review within 72hrs of the initial referral.

Provision of Strength/Balance Programmes in a wide range of community settings including community centres and a GP surgery

Outcomes:

170 NIAS referrals to Falls Prevention Team

1284 assessments completed April 2015-16

Strength & Balance Programmes for those at risk of Falls

Raising awareness of programme benefits: Pharmacies/GPs/Community/Carers/

Reducing Falls, Reducing Fear, Reducing Fractures

Saving NHS Resources

Benefits of the service:

Clients completing the strength & balance programme

67% improve on FES-I (fear of falling outcome measure)

54% improve on TUAG (balance and mobility outcome measure)

Pharmacy – Medication review

61% recommendations made to GP by falls pharmacist were implemented

Leggett; A Multi-disciplinary approach to falls prevention in the elderly

Patient Experience: 73 year old lady referred from GP. No history of falls but significant fear of falls. Completed 12 week strength and balance program.

“My confidence has grown, my balance is so much better now and I don’t have the same fear of falling. Since starting the class I can get to the bathroom in time.”

Next Steps: Further expansion of strength/balance programme in a range of community settings-massive potential to address unmet need and produce significant health gain.

Keywords: elderly falls prevention integrated care
