

Stand Up Right - Stay Upright!



**Building falls prevention capacity through
workforce development**

Project Information Sheet 3 - December 2003

Falls Prevention Seminar Roadshow

The Falls Prevention Seminar Series took place over September 22-25. The seminars were held in Burnie, Launceston and Hobart, and were facilitated by Jerry Moller, an expert in injury prevention strategies for older people.

In each location separate seminars were targeted towards the general community, policy makers in the health care industry, and health care professionals. The community seminars informed the public on avoiding falls injury. The policy makers' seminars were designed to raise awareness of the costs associated with falls injuries and the need for interventions and prevention strategies on a societal level.

The health professionals' seminars explored the role of the health professional in falls injury reduction. These seminars included a presentation by Jerry Moller outlining the population changes anticipated for Tasmania and the associated increase in falls injuries and resultant hospitalisations.

Population projections predict that in Tasmania, the proportion of the population aged over 65 will rise rapidly from 2003 to 2051. By 2007, 15% of the Tasmanian population will be aged 65 years or over, and by the year 2015, Tasmania will be the 'oldest' state in Australia in terms of population.

The risk of falls injury rises greatly over the age of 65. To cope with the increase in such injuries, Tasmania will require 50 additional nursing home beds and 13,000 bed days.

Issues surrounding early intervention and prevention strategies were explored in these presentations and through hypothetical case studies.

These hypothetical case studies consisted of panels of five health professionals. Each panel included a General Practitioner, Practice Nurse, Pharmacist, Physiotherapist and Occupational Therapist. Jerry Moller presented the case to the panel, who then interpreted the case from their own specialised perspectives and advised the audience on how they would approach the problem.

Upon conclusion of the seminars, health professionals were requested to complete a feedback survey (which generated a high response rate of 77%). 95% of respondents agreed or strongly agreed that the hypothetical case study provided better understanding of the roles of various health professionals in falls prevention processes.

When asked about the most valuable thing learnt at the seminars, responses included: recognition of the need for communication between health professionals; the importance of falls prevention; the scope of the problem; and the need for public and government awareness and action.

Eighty-five percent of respondents indicated that they found the seminar content better than average or excellent, and 86% found the relevance of the seminars' content better than average or excellent. Significantly, 91% of respondents indicated that the seminars gave them better understanding of falls preventions strategies and issues.

Stand Up Right – Stay Upright! Progress Update

Stand Up Right – Stay Upright! a National Falls Prevention for Older People Initiative is managed by the University Department of Rural Health, Tasmania and funded under a grant from the Department of Health and Ageing. The project aims to reduce the overall incidence of falls and fall related injuries among community dwelling people aged 65 or more years.

The establishment of two workforce development initiatives has been the focus of the project, i.e. the Department of Emergency Medicine (DEM) initiative at Royal Hobart Hospital and the General Practice/Enhanced Primary Care (GP/EPC) initiative in Northern Tasmania.

The DEM initiative, which has been recruiting non-admitted falls patients since late February 2003, aims to improve links between the DEM and General Practitioners (GPs). As a component of the project, each non-admitted falls patient is provided, at discharge, with information about the project and a Falls Prevention Information Leaflet with 'Questions to consider' and a simple test to determine 'Are you at risk?'

During the first seven months of the project there were an average of four non-admitted falls clients presenting at DEM each week. As at 30 August, 31 of these patients had agreed to participate in the project, involving two telephone interviews. Sixty-seven patients declined to participate. Of those patients enrolled in the project, most are either married (42%) or widowed (48%) and 58% live alone. Most are female (81%) and most do not need help with activities of daily living (78%), with partners or home help representing the major assistance for the remaining clients. Interestingly, there is a significant number of fallers who are visitors to Tasmania with 10.5% of non-participating clients being from other states.

Of all fallers presenting to DEM, 33% had a GP referral letter sent, up from 20% in the earlier stages of the project. Of the 31 clients participating in the project, 70% had visited their GP by the time they were first contacted by project staff, again up from 45% in the earlier stages of the project. Although these are seemingly positive results, the project continues to identify problems with discharge procedures for some older patients. There is no one identifiable reason for this; however, the highly acute nature of DEM and over-stretched resources all play a part. The implementation of a dedicated discharge team / discharge role may be necessary to alleviate this concern.

The northern component of the project has seen the implementation of a falls risk assessment tool into general practice. The assessment tool being used was developed by the Prince of Wales Medical Research Institute and involves the patient being tested against risk factors such as: previous falls, medications, vision, peripheral sensation, strength, reaction time and balance. During the first two months of implementation 26 patients were assessed using the tool with three patients having 5 or more risk factors present, indicating 12 times the total risk increase.

In all patients assessed using the tool three risk factors were most prevalent, i.e. the use of four or more medications, low contrast visual acuity and balance as tested by a near tandem stand test. Preliminary findings suggest that the assessment tool is a useful device in assisting the general practitioner to identify specific areas of concern in relation to falls prevention for older people. Work is progressing to have several other practices implementing the assessment tool within the near future.

Upcoming Conferences

The Australian Falls Prevention Inaugural Conference entitled "From Research to Practice" will be held in Manley, Sydney, from 21-23 November 2004. The conference includes guest speakers, workshops, and trade exhibitions.

For further information please visit www.powmri.edu.au/AFP2004

The Australian Association of Gerontology's 37th National Conference entitled "Maturing Assets" will be held on the 17-19 November 2004 in Melbourne.

For further information please visit www.aag.asn.au/ or email aag.conf@flinders.edu.au

The 7th Australian Injury Prevention and Control Conference and 2nd Pacific Rim Safe Communities Conference will take place over 15-17 September 2004 in Mackay, Queensland. The conference addresses injury related issues concerning various age groups.

For further details please visit www.nisu.flinders.edu.au/ajpn/conference2004

For further information about ***Stand Up Right – Stay Upright!*** contact ...

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The Hip Protector: A Valuable Injury Prevention Device

Hip protectors are products designed to reduce the risk of serious hip injuries from falls. The hip protector is a cup-shaped plastic shield that sits over the hip joint to protect it in the event of a fall. The shield is made of a durable plastic, designed and tested to withstand the impact from a fall. These plastic shields protect the hip by diverting the force of an impact away from the hip joint and onto the surrounding soft tissue.



The protective shields are inserted into specially-designed undergarments. These undergarments can be unisex or gender-specific, are most usually made of cotton, and can be easily cared for as they are washing machine and clothes dryer safe. Easily worn underneath the clothing, these undergarments are virtually undetectable. Wearing hip protectors is not a guarantee against sustaining a hip fracture from a

fall. However, wearing hip protectors reduces the risk of such fractures by 84%. This represents a significant reduction in the amount of hip fractures caused by falls among older people.

This is good news, as an estimated 14% of women and 6% of men will suffer a hip fracture at some stage in their later years (Edelson, 2003 at www.hon.ch/News/HSN/511210.html).

The uptake of hip protectors could therefore reduce these statistics dramatically, and provide confidence and protection to older people.

Hip protectors are available in Tasmania through Tasmanian Medical Supplies. Prices range from \$84.05 per pair with the protective shields sewn in, to \$89.50 per pair with removable shields. Orders can be placed with Tasmanian Medical Supplies by phoning (03) 6234 9777. Alternatively, interstate suppliers are accessible through mail order. For more information on interstate suppliers please contact the Independent Living Centre Tasmania on (03) 6334 5899.

For general product information:

www.hipprotector.com

www.hipshelp.com

For hip protector research information:

www.ozemail.com.au/~hipsaver

www.healthandage.com/Phome/gid2=1067