

# Review of DHS funded projects to prevent falls among older people in Victoria 2000-2007

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# Background

- Since 2000 DHS has funded a range of falls prevention projects
- Over time there has been a shift in focus from targeting specific settings to broader community and population based approaches
- Context of Primary Care Partnership strategy
- National Ageing Research Institute contracted to undertake a review for DHS

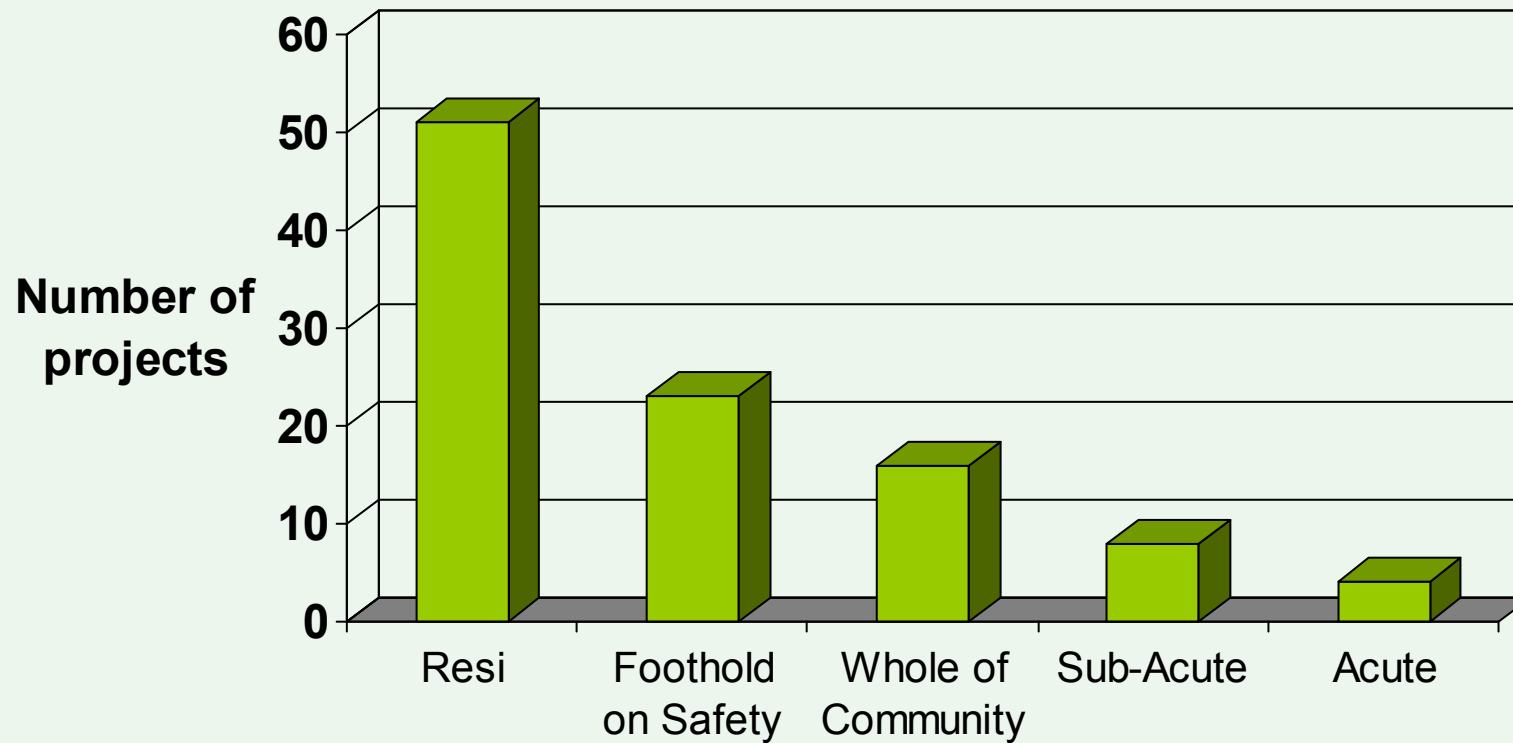


# Aims

- Conduct a comprehensive review of projects funded by DHS to prevent falls among older people in Victoria from 2000-2007
- Identify enablers and barriers of effective projects, and
- Identify effective strategies and models that have been integrated into existing health promotion frameworks, and sustained in policy and practice



# Projects in scope (n=102)

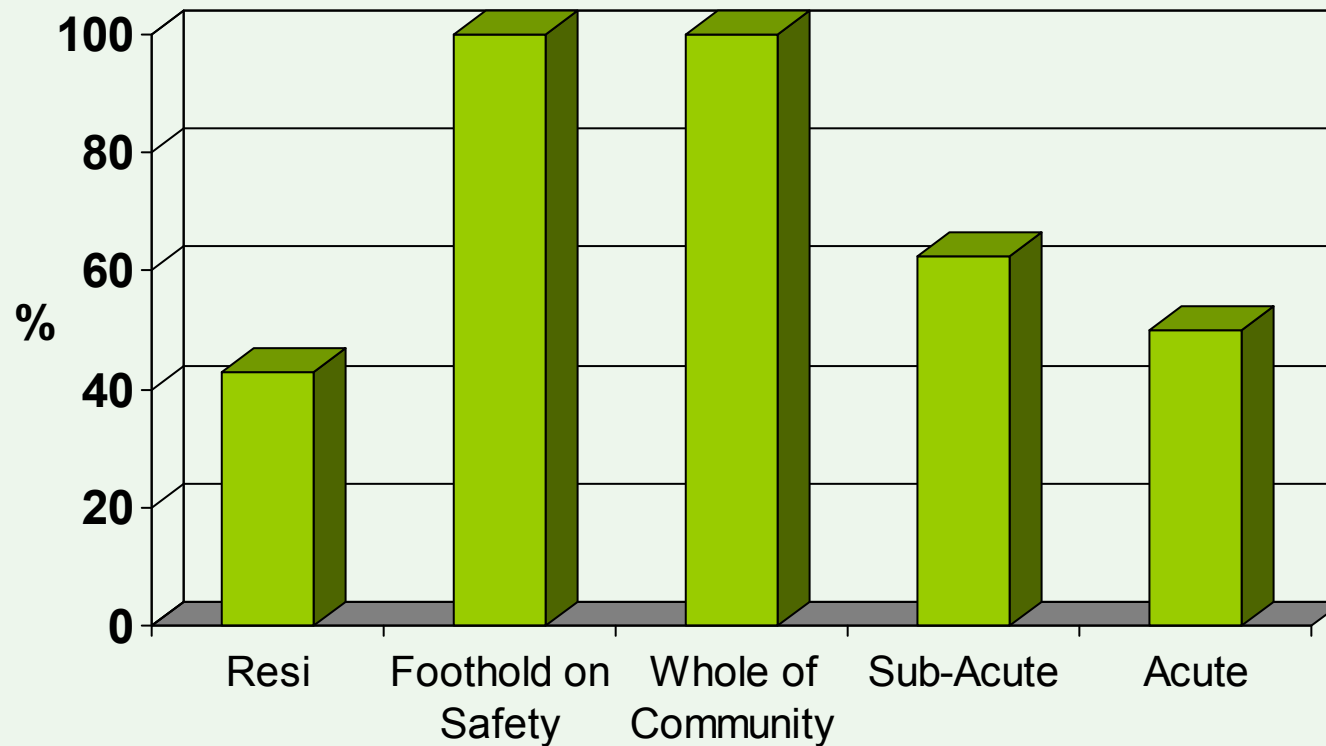


# Methodology

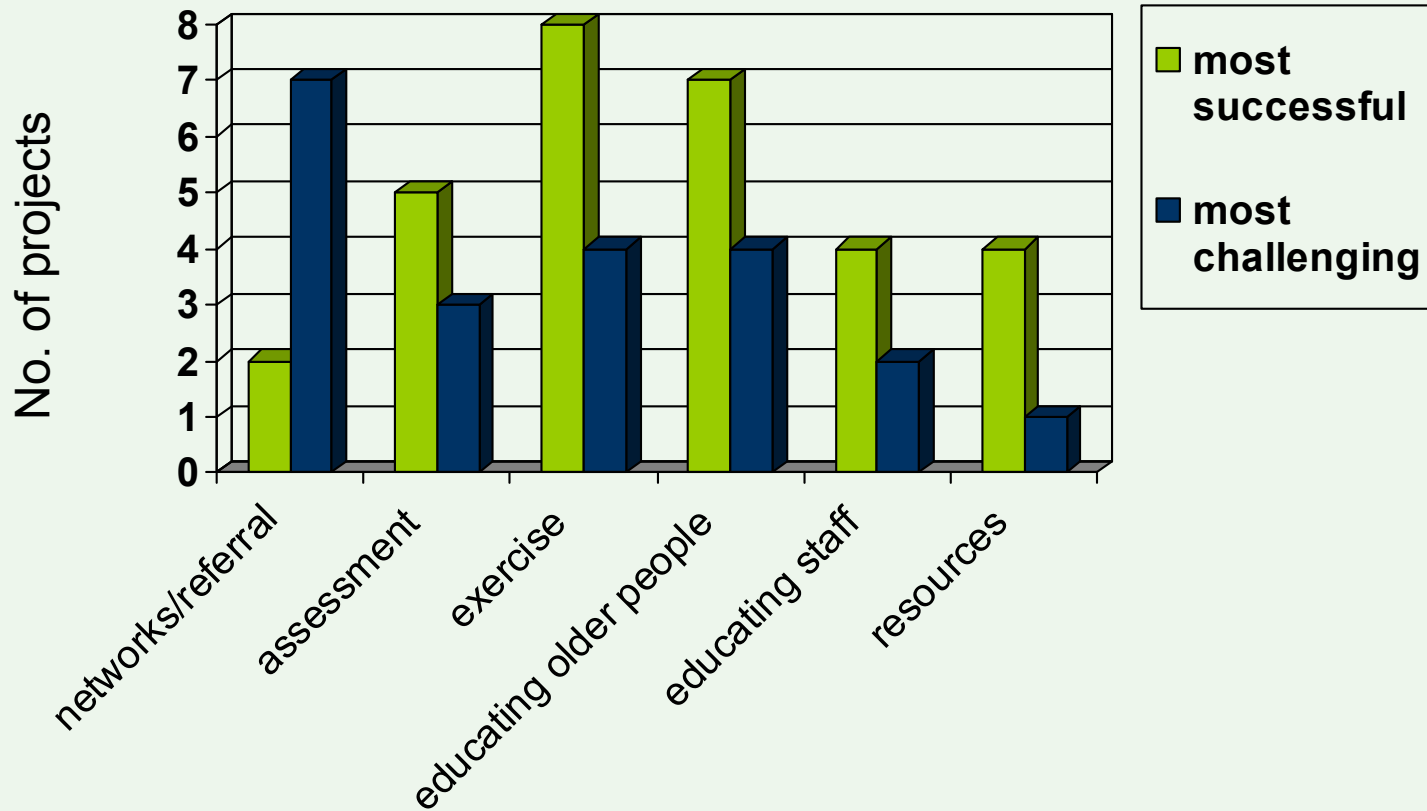
- Review of other falls prevention models (national & international)
- Review of Aged Care Branch funded projects:
  - Project reports
  - Survey to all projects
  - Interviews with project officers
- Focus Group with DHS departments
- Review model at workshops
- Review of model by expert panel



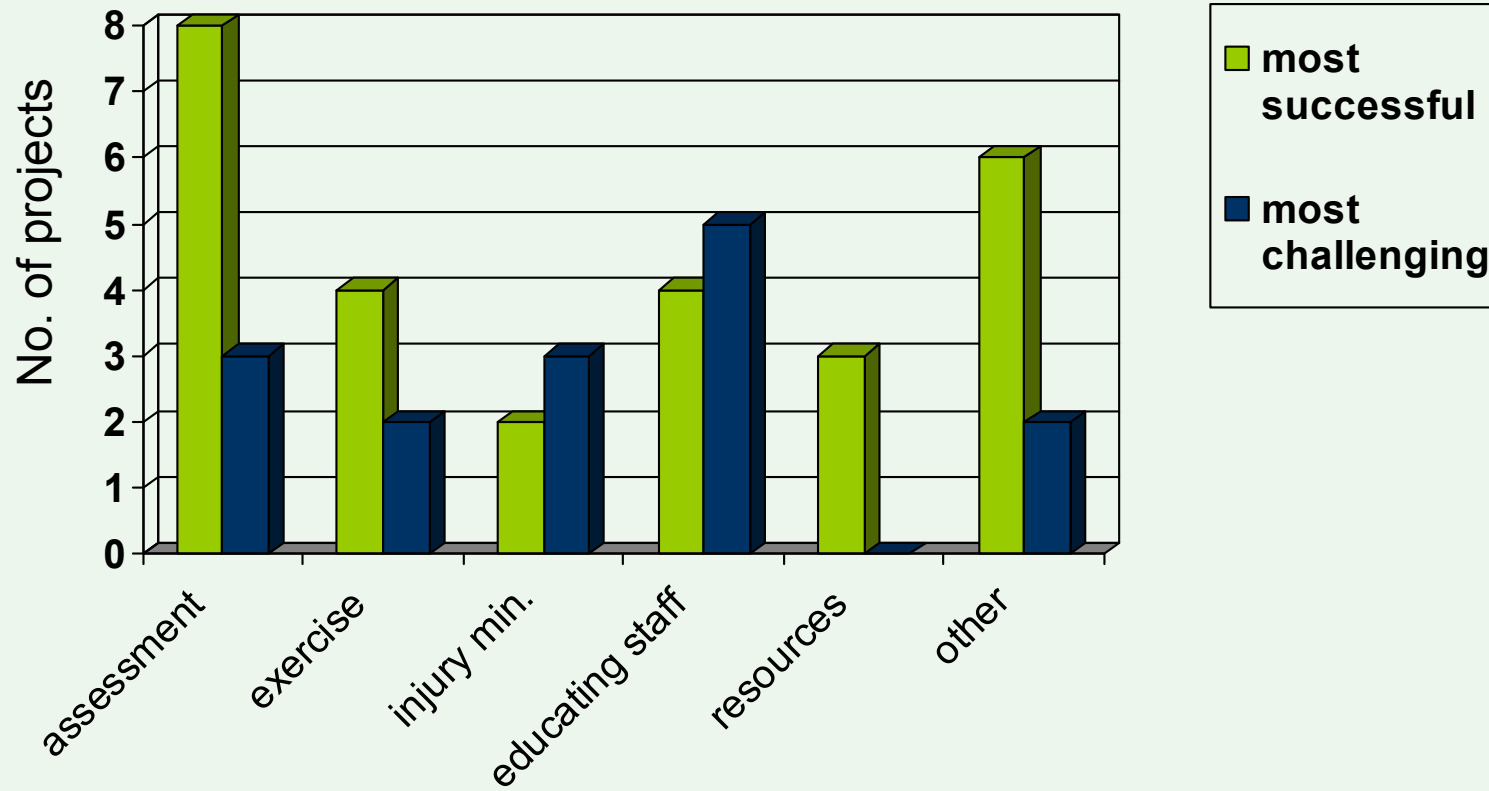
# Response rate (n=102)



# WoC & FOS (people living in their own homes)



# Residential and health settings



# Learnings and what can be built on

- Engaging older people: difficulties using peer educators
- Capacity building: staff issues - dedicated driver, time allocation, having relevant skills, high turnover
- Short term projects – difficult to establish momentum; taking on too many tasks
- Governance: Gaining management and staff support



# Learnings and what can be built on

- Falls risk assessment and referral pathways: tools complementing existing documentation; building on existing partnerships; linking in with chronic disease management
- Falls prevention interventions: unsafe environments for physical activity; Well for Life and Go for your Life funding
- Research and evaluation: Difficulties measuring outcomes and sustainability



# Key components of proposed model

1. Engaging older people
2. Capacity building
3. Governance
4. Falls Risk screening, assessment and referral pathways
5. Falls prevention and injury minimisation interventions
6. Research and evaluation



# 1. Engaging older people

- Promote positive messages of healthy active ageing
- Encourage older people who have a fall to seek advice
- Engage older people in the development and implementation of programs/activities
- Encourage older people to complete self-administered check lists of falls risk factors



## 2. Capacity building

- Build capacity of health & community care workforce to identify falls risk and appropriate, evidence based interventions through training and education
- Improve access to centralised evidence based guidelines, training packages & resources
- Ensure implications of new research findings are effectively communicated to educators and staff in the field
- Ensure other related industries are encouraged to support falls prevention interventions, such as a safe environment and appropriate physical activity options
- Provide mentoring and support for people engaged in falls prevention activities



# 3. Governance

- To identify falls prevention as an ongoing priority within the community
- To convey the importance of falls prevention to senior executives working in government, health, community and residential care settings
- To liaise with national bodies and policy developers to advocate for falls prevention activities that require a national approach



# 4. Falls risk screening, assessment & referral pathways

- Promote seamless delivery of falls risk assessment closely linked with falls prevention interventions
- Promote effective referral pathways and partnerships between the broad range of service providers and settings at a local level



# 5. Falls prevention & injury minimisation interventions

- Provide evidence based interventions to those with falls risk
- Provide health promotion activities for those with no falls risk
- Provide evidence based interventions in a range of culturally appropriate options
- Facilitate access to programs that are locally available, have options for transport provision, are affordable, and do not have substantial waiting times
- Facilitate access to up to date information about the range of locally based programs and interventions
- Foster the development of safer environments to reduce falls hazards in all settings



# 6. Research & evaluation

- Determine the most effective and efficient falls prevention programs and interventions through robust research and evaluation
- Communicate practical research findings to the health, residential and community care workforce
- Support agencies with data and expertise to effectively evaluate their programs



# Summary of progress to date

- Strengthening of partnerships to progress falls prevention activities
- Referral pathways established at local level and expansion of falls risk assessment
- Awareness raising amongst older people
- Development and expansion of exercise options
- Development and distribution of resources to support falls prevention
- Staff training and education



# Strategies to assist ongoing development

- To support implementation of the model:
  - Ongoing falls prevention positions
  - Statewide falls prevention policy
  - Statewide falls prevention steering committee
  - Supplemented with projects to investigate specific issues/interventions

To support effective and sustainable falls prevention strategies in Victoria



# Acknowledgements

- Funded by DHS Aged Care Branch
- Aged Care Service Development Unit; Margaret Thomas
- Expert panel; Ms Vicki Davies, A/Prof Mike Dorevitch, Prof Stephen Lord, Mr Paul Vardon, Ms Libby Tiller
- Participants who completed surveys and interviews and attended forums
- People who provided us information about their programs in other States/Territories

