

Novel Use of Student Advocates During Interprofessional Fall Prevention Screenings Promote Behavioral Change in Community Dwelling Older Adults

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Purpose / Hypothesis

- Falls are a major health problem with >30% of community-dwelling, older adults falling each year.
- Although older adults may recognize risks for falls, they often self-impose activity limitations due to a fear of falling and reduced self-confidence.
- The challenge for health professionals is not only to identify, screen and refer at-risk older adults, but to motivate the individual to take the necessary actions to reduce the risk factors.
- The purpose of this study was to determine the effectiveness of an interprofessional falls screening program to promote behavior change in older adults using student advocates who fostered development of an individualized action plan.

Methods

- Subjects: 80 community-dwelling older adults from a local retirement community
- Fall risk screenings done by UW Madison PT, OT, Pharmacy and Nursing students
- The Centers for Disease Control and Prevention's Stopping Elderly Accidents, Deaths, and Injuries (STEADI) guidelines were used to create the screening tools
- Screenings included: home safety, "brain health," blood pressure, heart rate, vision, medications, bone health, balance, gait and strength
- Students also acted as buddies or advocates to assist participants at all the screenings and aided in collating the results
- Participants received an individualized fall risk report card and a suggested action plan
- Development of the action plan utilized the Transtheoretical Model for Change focused on progression from the contemplation/preparation stage to the action stage.



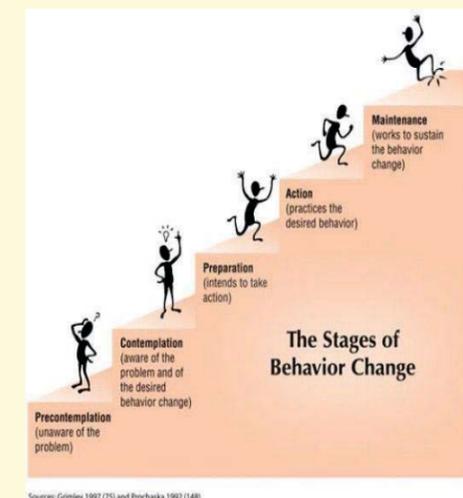
Figure 2: Screening Stations (Blood pressure, Brain Health, Balance)

Results and Conclusions

- At the one month follow-up, 77% of the participants had initiated their action plan
- Studies have suggested 25% implementation typical for participants of community programs
- Action may have been facilitated by:
 - interprofessional feedback
 - individualized action plans
 - Onsite availability of key staff
- Behavior change can be facilitated in the community setting provided the elements of education, individualized results, and guided personal reflection, are present.



Figure 3: Medication Review



Name: _____ Age: _____ Phone: _____

Fall Risk Check List for March 28, 2017 No More Spring Breaks

Fall Risk Factor Identified	Factor Present?	Notes
Falls History		
Any falls in the past year?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Worries about falling or feels unsteady when standing or walking?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Risk for Falls Survey	Score ≥ 4 points	Yes <input type="checkbox"/> No <input type="checkbox"/>
Foot problems or foot wear issues?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Gait Strength & Balance		
4-Stage Balance Test	Full tandem stance < 10 seconds	Yes <input type="checkbox"/> No <input type="checkbox"/>
Gait Safety: Timed Up and Go Test (TUG)	Time ≥ 12 seconds	Yes <input type="checkbox"/> No <input type="checkbox"/>
Signs of unsteadiness? Yes / No	Strength: 30-Second Chair Stand Test	Yes <input type="checkbox"/> No <input type="checkbox"/>
Number of stands: Below average score for age/gender?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Medical Issues		
Postural Hypotension	A decrease in systolic BP ≥ 20 mmHg or a diastolic BP of ≥ 10 mmHg or lightheadedness or dizziness from lying to standing	Yes <input type="checkbox"/> No <input type="checkbox"/>
Problems with heart rate or rhythm?	Incontinence problems?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Vision	Acuity < 20/40 OR no eye exam in > 1 yr	Yes <input type="checkbox"/> No <input type="checkbox"/>
Medications		
Any psychoactive medications, medications with anticholinergic side effects, and/or sedating OTCs (e.g., Benadryl, Tylenol PM)?	Not using a vitamin D/Calcium supplement?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Bone Health		
Cognition		
Brain Health (Short Blessed Test)	Score ≥ 8	Yes <input type="checkbox"/> No <input type="checkbox"/>
Home Safety		
Home safety concerns?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Assistive Technology		

I am at a _____ Falls Risk (Low / Moderate / High)

Understanding My Risk for Falls:

Low Risk

- Understand your personal risk factors
- Vitamin D +/- Calcium
- Strength & balance exercises (community exercise or fall prevention program)

Moderate Risk

- Understand your personal risk factors
- Vitamin D +/- Calcium
- Physical Therapy to improve gait, strength and balance OR
- Community fall prevention program

High Risk

- Understand your personal risk factors
- See MD for a multifactorial falls risk assessment
- Vitamin D +/- Calcium
- Referral to Physical Therapy enhance gait, strength and balance
- Individualized interventions to address risk factors (modify medications, optimize vision, optimize home safety, manage and monitor hypertension)

My Action Plan for reducing my fall risk - 1

What I would like to do: _____

How I would like to do this: _____ With whose help? _____

When? _____

How confident I am in succeeding: (not at all) 0 1 2 3 4 5 6 7 8 9 10 (very confident)

My follow-up plan is: _____

My Action Plan for reducing my fall risk - 2

What I would like to do: _____

How I would like to do this: _____ With whose help? _____

When? _____

How confident I am in succeeding: (not at all) 0 1 2 3 4 5 6 7 8 9 10 (very confident)

My follow-up plan is: _____

Oakwood Resources: Pharmacy: 230-4217 Rehabilitation: 230-4443 Physical Wellness: 230-4401 Social Work: Tower/Gallery: 230-4272; Heritage/Dale: 230-4453

Community Resources: Safe Communities Madison-Dane County: www.safecommunity.net Click on the "Falls Prevention" tab to find community programs, resources and fall prevention classes: (608)441-3060 Madison School & Community Recreation (MSCR): www.msccr.org (608)204-3000 Sharing Active Independent Lives (SAIL): www.sailmadr.org (608)204-4221 S.A.F.E. at Home: a home safety check provided by Home Health United (608)233-7970

Figure 1: Fall Risk Report Card (front and back)

Clinical Relevance

Just as falls are multi-factorial, screenings should be interprofessional and lead to multi-factorial action plans. Therapists need to go beyond educating and foster behavioral change through motivational interviewing to understand barriers for change and aid in developing action plans.

REFERENCES

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