

Title of Intervention: Home-Based Intervention for Older Adults

Intervention Strategies: Individual Education

Purpose of the Intervention: To reduce the number of falls of older adults

Population: Older adults age 65 and older

Setting: Seattle Group Health Cooperative clinics and participants' homes; health care facility-based, home-based

Partners: None mentioned

Intervention Description:

- Individual Education:
 - Group 1: Participants received a 60-90 minute visit with a specially trained nurse educator. The objectives of this visit were to test health measures and develop a tailored follow-up intervention to address risk factors and motivate older adults to increase physical and social activity. The follow-up options included interventions for six risk factors: physical inactivity, excess alcohol consumption, hazards in the home, prescription drug use, uncorrected hearing or visual impairments. The exercise intervention consisted of a 2-hour exercise orientation class that tested fitness and use instruction and encouragement to begin a brisk walking program. The alcohol intervention included screening and referral to the Cooperative's alcohol treatment program and educational material. Participants at risk of falling were encouraged to have home safety inspections by a volunteer, or receive a self-administered checklist. For prescription drug users, nurses received each subject's drug profile and examined medical records. Written recommendations for medication changes to the participant's primary care team were given. Interventions for the hearing and vision impaired included referral for formal audiological and hearing aid evaluation. Behavioral intervention classes were provided for participants with uncorrectable hearing deficits. Participants with uncorrectable visual impairments received information about resources in the community designed to assist those with poor vision in maintaining activity and function.
 - Group 2: Home visits consisted of assessments and counseling relevant to cardiovascular disease prevention, breast and cervical cancer detection, influenza vaccination and seat belt use. Exercise was not emphasized. Follow-up activities were limited to existing pamphlets and classes available at the clinic.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Educator
- Training: Educator received training
- Technology: Not mentioned
- Space: Homes, meeting space
- Budget: Not mentioned
- Intervention: Educational materials, community resources
- Evaluation: Questionnaires

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures:
 - Mailed questionnaires were given at baseline, and at 1 and 2 years after randomization.

Outcomes:

- Short Term Impact: Not measured

- Long Term Impact: After 1 year, Group 1 participants reported a significantly lower incidence of declining functional status and a significantly lower incidence of falls than the control group. Group 2 subjects had intermediate levels of most outcomes. After 2 years of follow-up, the differences narrowed.

Maintenance: Not mentioned

Lessons Learned: Not mentioned

Citation(s):

Wagner, E. H., A. Z. LaCroix, et al. (1994). "Preventing disability and falls in older adults: a population-based randomized trial." *Am J Public Health* 84(11): 1800-6.