

Title of Intervention: Connecticut Collaboration for Fall Prevention (CCFP) Intervention

Website: <http://www.fallprevention.org/index.htm>

Intervention Strategies: Provider Education

Purpose of the Intervention: To improve providers' ability to identify and treat the health problems that lead to falls

Population: Health care providers

Setting: A variety of healthcare settings in Connecticut; health care facility-based

Partners: None mentioned

Intervention Description:

- **Provider Education:** The Connecticut Collaboration for Fall Prevention (CCFP) implementation team interacted with health care providers in a variety of presentation formats, including downloadable materials, one-on-one outreach, detailing visits, interactive sessions with small groups of providers, medical grand rounds and professional in-service formats. Regardless of presentation format or healthcare provider group, CCFP content featured an overview of the individual and societal costs of falls in the older population, a concise review of evidence-based risk factors for falls that could be reduced with assessment, direct intervention or referral to other services in the community, practical suggestions for how to effectively and efficiently incorporate fall risk assessment and management into practice and an overview of Medicare regulations and reimbursement policies. The presentations were supplemented by handout materials designed for practical use in clinical settings, for providers and for distribution to older patients.

Theory: Not mentioned

Resources Required:

- **Staff/Volunteers:** Presenters
- **Training:** Not mentioned
- **Technology:** Not mentioned
- **Space:** Room for educational presentations
- **Budget:** Not mentioned
- **Intervention:** Educational handouts, website materials
- **Evaluation:** Surveys, phones

Evaluation:

- **Design:** Cross-sectional
- **Methods and Measures:** Assessment and management of falls risk factors by the physicians were assessed through surveys administered in person or by the phone

Outcomes:

- **Short Term Impact:** A majority of the providers reported intervention or referral for all risk factors. Respondents were most likely to report directly intervening with or referring older patients for gait and transfer impairments and balance disturbances and least likely to do so when encountering foot or footwear problems and sensory or perceptive deficits.
- **Long Term Impact:** Not measured

Maintenance: Not mentioned

Lessons Learned: Older adults themselves must be targeted to improve their behavior when providers recommend strategies to reduce fall risk factors. Barriers related to reimbursement for medical care and the

fragmented healthcare system may require other solutions beyond the scope of CCFP, such as providing Medicare reimbursement for fall risk assessment and management.

Citation(s):

Fortinsky, R. H., M. Iannuzzi-Sucich, et al. (2004). "Fall-risk assessment and management in clinical practice: views from healthcare providers." *J Am Geriatr Soc* 52(9): 1522-6.

Chou, W. C., M. E. Tinetti, et al. (2006). "Perceptions of physicians on the barriers and facilitators to integrating fall risk evaluation and management into practice." *J Gen Intern Med* 21(2): 117-22.

Brown CJ, Gottschalk M, Van Ness PH, Fortinsky RH, Tinetti ME. Changes in physical therapy providers' use of fall prevention strategies following a multicomponent behavioral change intervention. *Phys Ther.* May 2005;85(5):394-403.