

Title of Intervention: Nurse-led falls prevention program

Intervention Strategies: Supportive Relationships, Environments and Policies

Purpose of the Intervention: To improve outcomes after falls

Population: Individuals aged 65 or over

Setting: Large teaching hospital: University Hospital Aintree, Liverpool; home-based

Partners: None mentioned

Intervention Description:

- Supportive Relationships: The intervention group was assessed for risk factors for falls at home by the falls nurse after the first fall. Medication, electrocardiogram, blood pressure, cognition, visual acuity, hearing, vestibular dysfunction, balance, mobility, feet and footwear were assessed using adapted versions of the falls checklist. Patients were given advice and education about safety in the home. Risk factors requiring further action were referred to relatives, community therapy services, social services and the primary care team.
- Environments and Policies: An environmental assessment identified inadequate lighting, tripping hazards and unsuitable furniture. Simple modifications were made with consent.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Nurses
- Training: Not mentioned
- Technology: Not mentioned
- Space: Not mentioned
- Budget: Not mentioned
- Intervention: Falls checklist
- Evaluation: Questionnaires, diaries, access to medical records

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures:
 - Mood, social support and mobility were assessed by questionnaires to the patients.
 - Further falls, consequent injury and subsequent place of treatments were recorded though diaries to be completed daily by the patients.
 - Medical and hospital records were reviewed and cross referenced.

Outcomes:

- Short Term Impact: The intervention group was significantly more independent and more mobile in the community than the control. More of the patients were directly referred for community services by the falls nurse than those in the control group.
- Long Term Impact: The intervention and control group showed no significant difference in falls after the program. The intervention group presented fewer major injuries than control and had fewer falls-related days in the hospital.

Maintenance: Not mentioned

Lessons Learned: The falls nurse intervention might lessen the need for formal care and reduce the economic burden of falls.

Citation(s):

Lightbody, E., C. Watkins, et al. (2002). "Evaluation of a nurse-led falls prevention programme versus usual care: a randomized controlled trial." *Age Ageing* 31(3): 203-10.