

Stopping Elderly Accidents, Deaths, and Injuries: Fall Prevention for Community-Dwelling Older Adults

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Background

Problem: Lack of routine fall screening and prevention increases older adults' risk for future falls.

- Falls are the leading cause of death due to injury among older adults in the United States.¹
- Most older adults do not report falls to their primary care provider,² and are likely to fall again.
- The Centers for Disease Control and Prevention (CDC) recommend annually screening older adults for falls followed by a risk assessment and individually tailored fall prevention plan to prevent future falls.³
- Fall prevention measures consistent with the CDC's Stopping Elderly Accidents Deaths and Injuries (STEADI) protocol can reduce the number of falls, injuries, and hospitalizations in community-dwelling older adults.

Purpose/Goals

Purpose: A quality improvement project to implement the CDC's fall prevention STEADI protocol in primary care.

Short term goals:

- 80% of positively screened patients will receive the Timed-Up and Go (TUG) test
- 80% of patients at moderate- or high-risk for falls will receive a risk assessment checklist and fall plan of care (FPOC)
- 80% of patients will have correct fall-risk identification
- 80% average overall protocol adherence score

Long term goal: Overall reduction in number of falls at one year follow up.

Methods

Setting: Small east coast primary care office

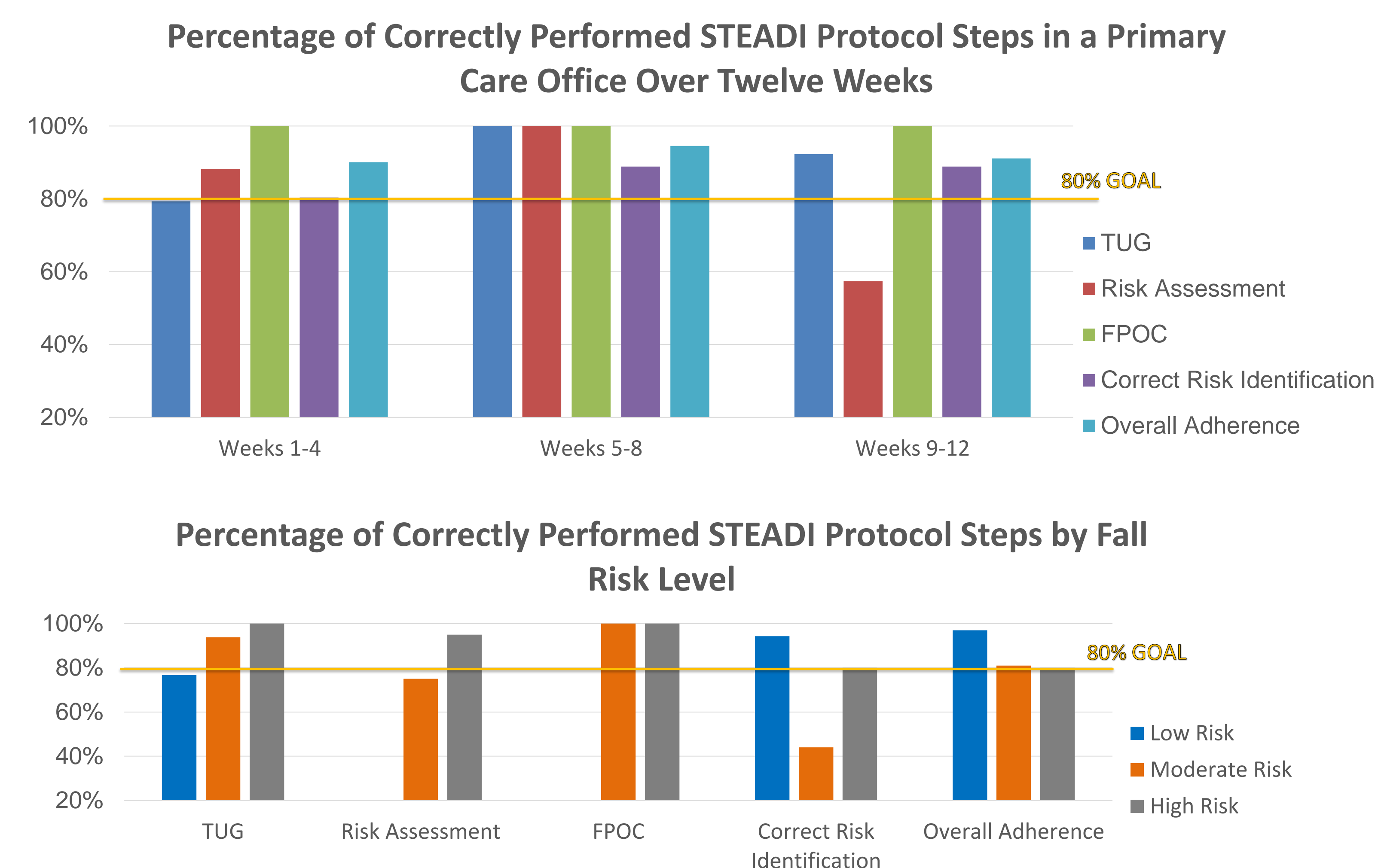
- STEADI resources were adapted into a STEADI packet for patient documentation and data collection.
- An exercise resource guide identified fall prevention exercise programs and community resources.
- STEADI fall prevention brochures were made available to older adult patients.
- Staff were trained in STEADI prior to implementation and during a mid-project reinforcement period.
- One-on-one packet reviews conducted with staff monthly to identify barriers to implementation and reinforce protocol adherence.

STEADI Protocol³

- All older adults screened annually for falls: 1) Did you fall in the past year (How many times and were you injured)? 2) Do you worry about falling? 3) Do you feel unsteady when walking or standing?
- Yes to any question = positive screen and warrants TUG test

Fall Risk Level	Correct Identification	STEADI Intervention
Low	No falls OR 1 fall (no injury) & normal TUG	Provide fall prevention brochure Follow-up screen in 1 year
Moderate	No falls OR 1 fall (no injury) & abnormal TUG	Appropriate risk assessment checklist components Address risk factors in FPOC & exercise referral Follow-up screen in 1 year
High	2 or more falls OR 1 fall with injury	Complete full fall risk assessment checklist Address risk factors in FPOC & exercise/PT referral 30 day follow-up, re-screen 1 year

Figures



Results

- Majority of patients screened positive for falls (54%), of which 91% indicated concerns about falling or feeling unsteady when walking or standing.
- 80% goal was met for patients with a FPOC, correct fall risk identification, and overall protocol adherence scores; however rates varied by risk level.
- Positively screened patients with the TUG overall improved to above goal in the second and final time interval.
- Moderate-risk patients with a fall risk assessment remained above goal in the first two time intervals, and dropped in final interval despite all having a FPOC.

Discussion

- A majority of STEADI goals remained above 80% or improved with continued training.
- Identifying moderate-risk patients was most challenging.
- All moderate- and high-risk patients received a FPOC to prevent falls, although risk assessments for the moderate-risk group dropped below goal in the final time interval.
- Adherence rates were complicated by fall-risk level supporting the 2019 protocol change to remove the three-tier classification.

Limitations:

- Cannot determine if participants adhered to FPOC recommendations.
- Too early to draw conclusions regarding efficacy of STEADI fall prevention interventions in reducing falls.

Conclusion

- Falls among older adults are common, fatal, under-reported, and preventable with tailored fall-risk interventions and fall prevention exercises.
- The CDC's STEADI protocol can be successfully implemented in primary care to screen older adults for falls, address fall-related risk factors, and refer to community exercise resources.
- Continuous staff reinforcement & education is necessary to ensure correct STEADI protocol adherence and sustainability.

References

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