

# Fall Risk Management

Focus on implementing  
evidence based, tailored  
exercise across the  
continuum

Rebecca J. Tarbert PT, DPT, CLT, GCS  
Jennifer C. Sidelinker PT, DPT, GCS

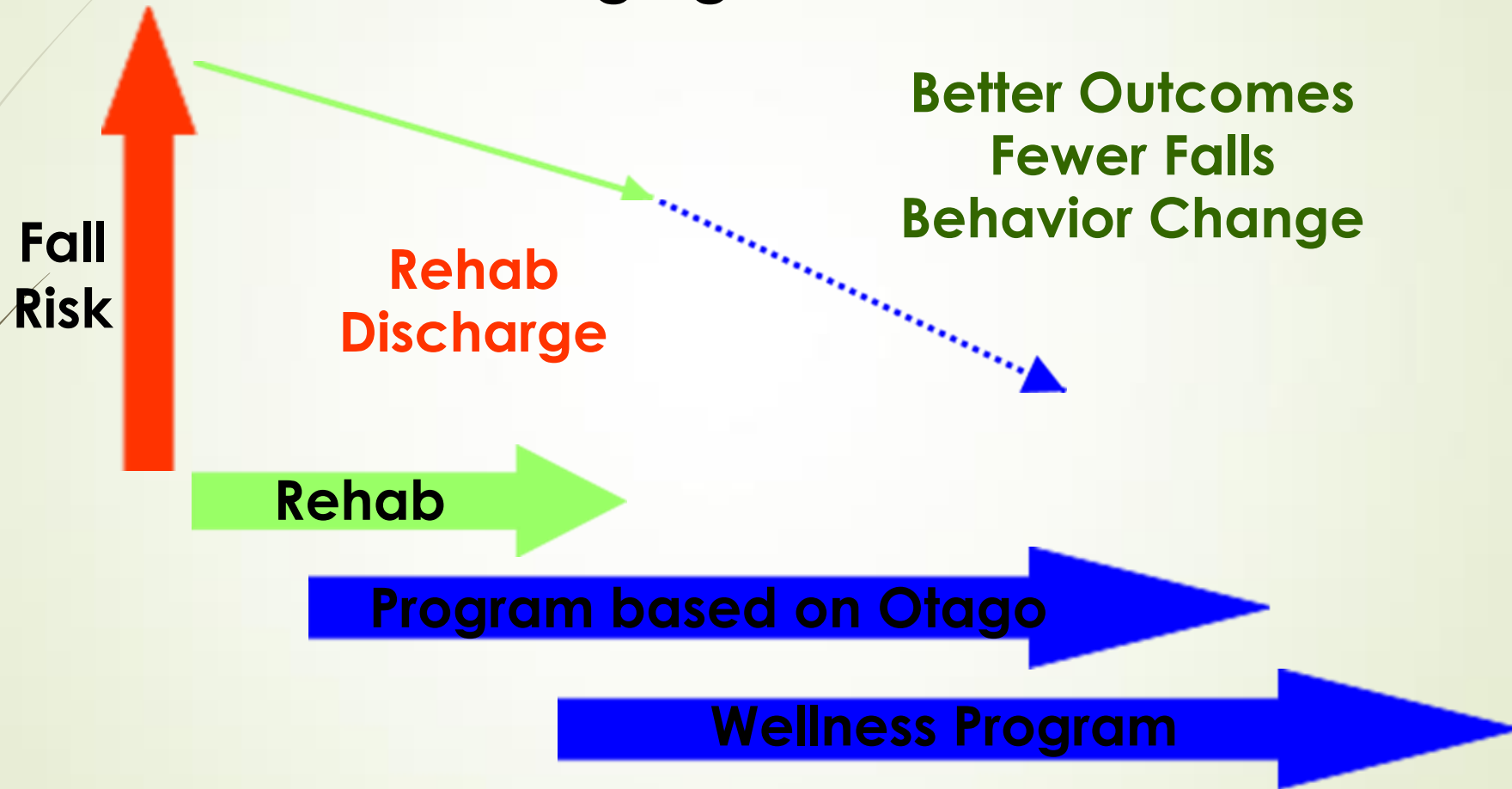


Why?



# Objective

## Rehab, Bridging & The Continuum





# Methods





# Standardized Staff Training Curriculum



- Overview for Leadership
- Foundations of Fall Risk Management
- Role of Medications in Fall Risk Management
- Role of PT in Falls Risk Management
- Evidence-Based Interventions: the Otago Exercise Program
- GRS Otago Exercise Competency
- Fall Risk Management in the Continuum
- Role of OT in Falls Risk Management
- Role of ST in Falls Risk Management

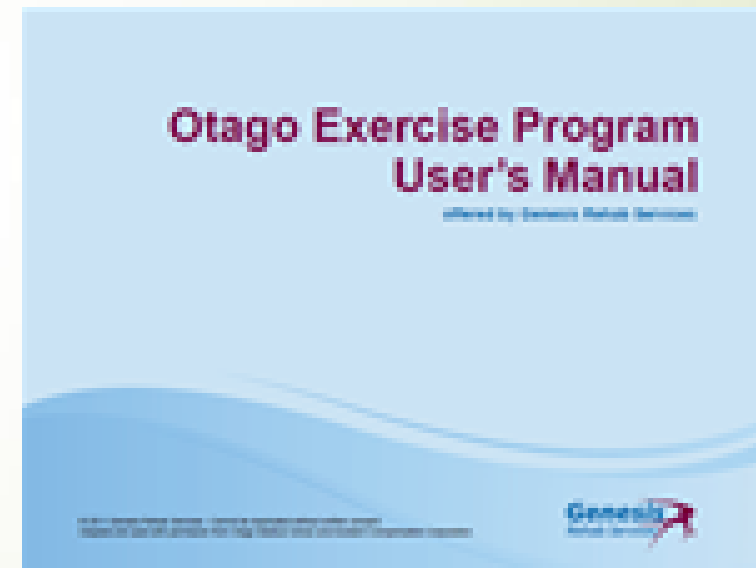
# Support for an Effective Continuum

**Genesis**  
Rehab Services

Otago Exercise Program Tracking Log  
Name: \_\_\_\_\_

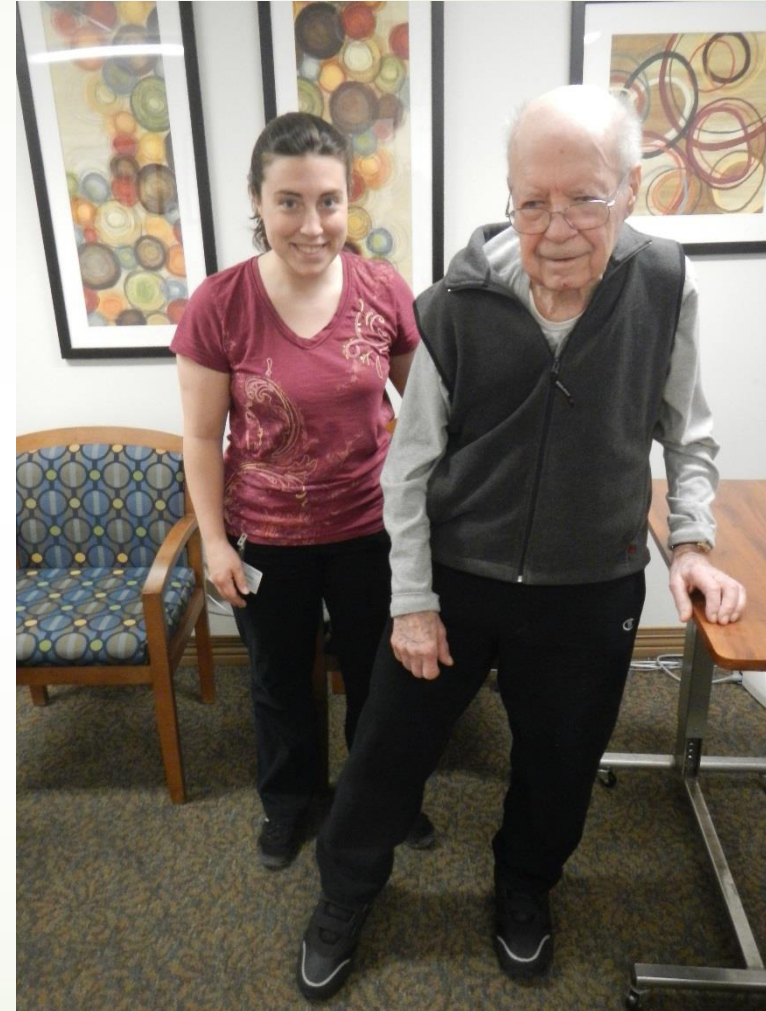
	Date	Date	Date
<b>Warm Up: 5 each</b>			
Head movements			
Neck movements			
Back extension			
Trunk movements			
Ankle movements			
<b>Strength Exercises: Weight/Sets of 10</b>	<b>Wt / # Sets</b>	<b>Wt / # Sets</b>	<b>Wt / # Sets</b>
Front knee strengthening	/	/	/
Back knee strengthening	/	/	/
Side hip strengthening	/	/	/
<b>Balance: Sets of 10/Support</b>	<b># Sets / S or U</b>	<b># Sets / S or U</b>	<b># Sets / S or U</b>
Calf raises	/	/	/
Toe raises	/	/	/
Knee bends	/	/	/
Sit to stand	/	/	/
<b>Balance: 2x per side—Support</b>	<b>S or U</b>	<b>S or U</b>	<b>S or U</b>
Heel-toe standing (10 sec)			
One leg stand (10 sec)			
<b>Walking: 2x each direction—Support</b>	<b>S or U</b>	<b>S or U</b>	<b>S or U</b>
Backwards walking (10 steps)			
Sideways walking (10 steps)			
Heel-toe walking (10 steps)			
Heel walking (10 steps)			
Toe walking (10 steps)			
Walking and turning around ("8")			
Heel-toe walking backwards (10 steps)			
Stair walking (or alternating high marches: sets of 10)			

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# Findings





# Critical Elements for Success

- ▶ Standardization of the message
  - ▶ Standardization of the care
  - ▶ Structure
  - ▶ Simplicity
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# Challenges



- ▶ PT “silo” intervention practices
- ▶ Understanding of evidence translation to improve practice
- ▶ Staffing
- ▶ Limited continuum options
- ▶ Lack of standardized outcomes reporting



# Lessons Learned

- Simplify the message and requirements
  - Preserve critical elements for fidelity
  - Engage regional “champions” for consultation and problem solving
  - Engage early adopters as role models
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# Outcomes

- 100% adoption of standard PT evaluations that identify risk factors for falls.
- Standardization in use of objective measures in assessment of leg weakness, balance impairment and gait unsteadiness.
- Early adopters implemented use of an Otago translation for effective fall risk management across the continuum in a variety of care settings.


# Example

- ▶ PT includes Otago exercise translation into all appropriate patient plans of care.
- ▶ Recreation staff trained & deliver group Otago based classes regularly.
- ▶ Dementia care aides trained & deliver one-to-one Otago based sessions regularly.





# Next Steps

- Standardize reporting of Otago recommendation at time of PT discharge
  - Improve falls data collection and analysis system
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# Conclusions

- ▶ Integrating an evidence-based exercise program to address modifiable fall risk factors across a care continuum is feasible
  - ▶ Formation of collaborative partnerships is critical to deliver programs with sufficient dose to achieve sustained fall protection
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