Queensland Government

Queensland Stay On Your Feet® model for falls prevention in older people across the health continuum

In the community	In the community	In hospital	In-home support	Residential aged care
Healthy active ageing (low risk)	**Starting to feel unsteady (at risk)**	**Increased risk**	**Vulnerable (ongoing risk)**	**Frail (high risk)**

Low risk — High risk

Guiding principle	**Primary prevention** Support healthy active ageing and untargeted multifactorial interventions.	**Primary prevention** Support healthy active ageing, targeted and untargeted multifactorial interventions and primary health care assessment and management.	**Secondary and Tertiary prevention** Screen and assess falls risk, and manage targeted single or multiple risk factors to prevent falls and regular re-assessment.	**Tertiary prevention** Screen and assess falls risk, and manage targeted single or multiple risk factors to prevent falls and regular re-assessment.	**Tertiary prevention** Assess falls risk, and manage targeted single or multiple risk factors to prevent falls and regular re-assessment.
Falls risk	**Awareness** Use *Queensland Stay On Your Feet® Checklists:* › *Will you stay active and independant?* › *How to Stay On Your Feet®.*	**Screening** Use *Falls Risk for Older People – Community Setting (FROP-Com)* or *Physiological Profile Assessment (PPA).* Check gait and balance, ask about falls in last 12 months, use *Timed Up and Go* test.	**Screening & assessment** Refer to **Preventing falls and harm from falls in older people* – for screening and assessment tools.	**Assessment** Use *Falls Risk for Older People – Community setting (FROP-COM)* or *Physiological Profile Assessment (PPA)* and *Ongoing Needs Identification (ONI).*	**Assessment** Refer to **Preventing falls and harm from falls in older people* – for screening and assessment tools eg. Falls Risk Assessment Tool (FRAT).
Involve	› older person › family and/or carer › interpreter (if needed).	› older person › family and/or carer › interpreter (if needed).	› older person › family and/or carer › interpreter (if needed).	› older person › family and/or carer › interpreter (if needed).	› older person (if possible) › family and/or carer › other residents › interpreter (if needed).
Health professionals multi disciplinary approach	› community nurses › dieticians/nutritionists › exercise physiologists › general practice nurses › general practitioners › health promotion officers › Indigenous health care workers › multicultural health care workers › occupational therapists › optometrists › pharmacists › physiotherapists › podiatrists › other health care providers.	› ambulance services › community nurses › dieticians/ nutritionists › domiciliary services › exercise physiologists › general practice nurses › general practitioners › health promotion officers › Home and Community Care services › Indigenous health care workers › multicultural health care workers › occupational therapists › optometrists › pharmacists › physiotherapists › podiatrists › other health care providers.	› ambulance services › hospital staff – medical – nursing – allied health – operational staff › community health professionals › general practitioner **Policy:** › Standard falls prevention strategies * Page 8 › The Australian Council of Health Care Standards EQuIP; Falls Management Continuity of Care and Medicines Management › WHO Health Promotion Standards in Hospitals.	› ambulance services › community nurses › dieticians/nutritionists › domiciliary services › Emergency Department staff › exercise physiologists › general practice nurses › general practitioners › geriatrician › health promotion officers › Home and Community Care services › Indigenous health care workers › multicultural health care workers › occupational therapists › optometrists › pharmacists › physiotherapists › podiatrists › other health care providers.	› allied health › dieticians/ nutritionists › diversional therapists › exercise physiologists › general practitioners › geriatrician › health promotion officers › nursing staff › occupational therapists › pharmacists › physiotherapists › podiatrists › other health care providers.
Interventions	› address health determinants › promote healthy lifestyles › physical activity (balance and strength exercises with progressive intensity) › remove environmental hazards in the home and public places › review medication › manage chronic conditions › conduct annual eye tests and remove cataracts › support good nutrition for bone and muscle strength and energy › promote foot care and safe footwear › improve walking pattern › promote older people in a positive, healthy active way › incorporate falls prevention and healthy active ageing into organisation's core business, structures, systems and services › develop supportive environments in the community infrastructure and services eg. hand rails, access to physical activity › develop social and community support networks › enhance communication between health care providers, families and/or carers and the individual › enhance integration between settings › follow up and review risk factors and interventions.	› address health determinants › promote healthy lifestyles and primary health care › physical activity (balance and strength exercises with progressive intensity) › remove environmental hazards in the home and public places › review medication › manage chronic conditions › conduct annual eye tests and remove cataracts › support good nutrition for bone and muscle strength and energy › promote foot care and safe footwear › improve walking pattern › promote older people in positive, healthy active way › incorporate falls prevention and healthy active ageing into organisation's core business, structures, systems and services › develop supportive environments in the community infrastructure and services eg. hand rails, access to physical activity › develop social and community support networks › enhance communication between health care providers, families and or carers and the individual › enhance integration between settings › follow up and review individual risk factors and interventions.	**Pre-admission:** › patient and staff education (including ambulance and paramedic staff) › GP administered tests and management guidelines. **Admission:** › GP notification of planned or unplanned admission › falls risk screening on admission › patient orientation. **In-patient:** › mobility assessment and appropriate aids and assistance › recording falls and documenting interventions › patient participation in functional activities and exercise › continence plan › medication management › environment safety › policies for use of bedrails and restraints › Vitamin D supplementation with calcium › multidisciplinary patient care using a holistic approach and health promotion strategies › case conference to prepare patient for discharge. **Discharge:** › as a part of discharge planning falls risk and prevention strategies and discharge referrals sent to:- – GP in 24-48 hrs – Community health professionals. **Rehabilitation:** › arrange post hospital rehabilitation.	› post hospital rehabilitation program improving strength, balance and functioning › review medication › balance, gait, strength and endurance exercises › occupational therapy home assessment with home modifications › manage chronic conditions › cataract surgery › Vitamin D and calcium › foot care and safe footwear › hip protectors › address concerns about falling › continence management › personal alarms › educate about getting up from the floor after a fall › follow up and review individual risk factors and interventions.	› incorporate falls prevention and healthy active ageing into organisation's core business, structures, systems and services › staff training and guidance › review and manage medication › educate residents › assess and modify environment › supply and repair mobility aids › Vitamin D and calcium supplementation and nutritional review › implement individual and facility wide interventions › ongoing monitoring of the resident with post-fall problem solving › continence management › balance and strength exercises › foot care and safe footwear › syncope and dizziness assessment and management › hip protectors › follow up and monitoring of individual risk factors and interventions.
Key resources	Queensland Stay On Your Feet® Community Good Practice Guidelines: Preventing falls, harm from falls and promoting healthy active ageing in older Queenslanders 2007. Queensland Stay On Your Feet® Community Good Practice Toolkit 2007.	Queensland Stay On Your Feet® Community Good Practice Guidelines: Preventing falls, harm from falls and promoting healthy active ageing in older Queenslanders 2007. Queensland Stay On Your Feet® Community Good Practice Toolkit 2007.	*Australian Council for Safety and Quality in Health Care 2005. Preventing falls and harm from falls in older people. A Resource Suite for Australian hospitals & Residential Aged Care Facilities (Green Box).	Home and Community Care HACC Best Practice Falls Prevention Resource Kit 2004.	Australian Council for Safety and Quality in Health Care 2005. Preventing falls and harm from falls in older people. A Resource Suite for Australian hospitals & Residential Aged Care Facilities (Green Box).