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Beyond Home Hazard Reduction: the role of OT in the falls prevention team

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Rationale: Identifying and minimizing environmental hazards is the bread and butter work of occupational therapists in falls prevention. However, research suggests that success through this intervention is due to consideration of the interaction of the person with their environment, rather than the environment itself. The occupational therapy home visit allows assessment of this interaction but also enables the therapist to contribute to the overall falls investigation.

Aim: The aim of this presentation is to discuss the extensive role of the occupational therapist in falls prevention; in direct intervention, and in referring to other evidence-based strategies.

Approach: The presenter was involved in the development of a multidisciplinary falls prevention program within an ambulatory care service of an acute hospital. The initial target group were patients aged 65 years and over, who presented to the emergency department following a fall, but were not admitted. A review of research informed multifactorial, evidence-based interventions. These were incorporated in the resulting Falls Intervention Team (FIT) program, developed over the past five years. Patients are assessed during allied health home visits and medical clinic appointments and multidisciplinary case plans developed. Patients also attend a hospital based education and exercise program.

Findings: The occupational therapy intervention is both discipline-specific and interdisciplinary. It includes: (1) post - injury advice to prevent secondary problems; (2) falls investigation; (3) home hazard assessment and remediation; (4) education; (5) developing functionally-based balance activities; and (6) referring to local doctors and other services when risk factors outside the therapist's expertise are identified or suspected.

Conclusion: Occupational therapists are able contribute to *many* aspects of the management of falls patients.

Learning Outcomes: Awareness of the multi-factorial nature of falls and knowledge of evidence-based multidisciplinary interventions is important. It assists the therapist in directly decreasing falls risks, and in accepting responsibility to refer on where appropriate.