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Literature Review

Implementing the evidence for preventing falls among community-dwelling older people: A systematic review

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Abstract

Problem and objective

The translation of the evidence-base for preventing falls among community-dwelling older people into practice has been limited. This study systematically reviewed and synthesised the effectiveness of methods to implement falls prevention programmes with this population.

Methods

Articles published between 1980 and May 2010 that evaluated the effects of an implementation strategy. No design restrictions were imposed. A narrative synthesis was undertaken.

Results

15 studies were identified. Interventions that involved the active training of healthcare professionals improved implementation. The evidence around changing the way people who fall are managed within primary care practices, and, layperson, peer or community delivered models was mixed.

Impact on industry

Translating the evidence-base into practice involves changing the attitudes and behaviours of older people, healthcare professionals and organisations. However, there is a need for further evaluation on how this can be best achieved.

Keywords

Falls prevention; Implementation; Older adults; Evidence-based practice; Systematic review

Figures and tables from this article:

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1 Accidental Falls/
2 (fall or falls or fallers) or fallen).ab,ab
3 1 or 2
4 exp Ageof/
5 (adults) or older* or older or old or oldest).ab,ab
6 4 or 5
7 3 and 6
8 (prevent* or reduce* or manage*).ab,ab
9 7 and 8
10 Program Evaluation/
11 Information Dissemination/
12 Barrier*.ab,ab
13 control*.ab,ab
14 training*.ab,ab
15 feasibility*.ab,ab
16 program*.ab,ab
17 implement*.ab,ab
18 dissemination*.ab,ab
19 absp*.ab,ab
20 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19
21 9 and 20
22 limit 21 to year 1980 Current
    
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Fig. 1. Master search strategy written for Medline (OVID) and adapted for different databases.

[Figure options](#)

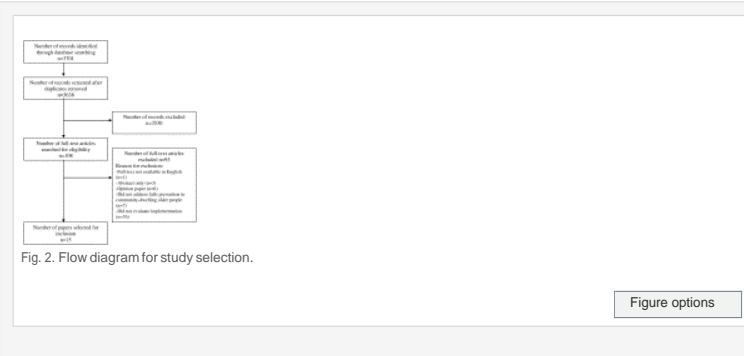



Fig. 2. Flow diagram for study selection.

Figure options


Table 1. Quality Assessment of Included Studies using the Cochrane Risk of Bias Tool.



Yes = adequately addressed No = inadequately addressed

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Table 2. Description of Study Characteristics, Stratified by Type of Implementation Method.




ED Emergency Department; CFFP Connecticut Collaborative Falls Prevention; CGA Comprehensive Geriatric Assessment; ACOVE-2 Assessing Care of Vulnerable Elders; CBT Cognitive behavioural therapy; SOYF Stay of your Feet

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Table 3. Individual Study Results, Stratified by Implementation Method.



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Victoria Goodwin, PhD, is a Senior Research Fellow for PenCLAHRC (Peninsula Collaboration for Leadership in Applied Health Research and Care) at the University of Exeter, UK and a physiotherapist for Torbay Care Trust. She has recently completed a doctorate evaluating an exercise intervention to reduce falls among people with Parkinson's disease. She is involved with the British Geriatrics Society specialist section for Falls and Bone Health and is former national chair of AGILE (Chartered Physiotherapists working with Older People). Her research interests are the rehabilitation of older people and those with long term conditions.

Tracey Jones-Hughes, PhD, is an Associate Research Fellow for PenTAG (Peninsula Technology Assessment Group), currently working on Health Technology Assessment. She has a diverse background, ranging from nursing to earning a PhD in environmental chemistry at Plymouth University. However, more recently she became involved in project facilitation for PenCLAHRC, focusing on translation of research into clinical practice. Linking with the varied nature of her career, Tracey's current research interests include systematic reviews of environment and human health related issues.

Jo Thompson-Coon, PhD, is a Research Fellow for PenCLAHRC as part of the evidence synthesis team. Her background is in pharmacology and she has worked in the respiratory and complementary medicine fields. Her current role involves identifying and prioritising potential local research projects and producing systematic reviews to inform evidence-based practice.

Kate Boddy, MSc, is an Information Specialist at PenCLAHRC where she has been working since 2009. She has been working in health services research since 2004 and received her MSc in Library and Information Management from the University of the West of England in 2009. She has worked on numerous systematic reviews providing information support and has a particular research interest in the ways in which different search interfaces can affect search results.

Ken Stein, MD, is Professor of Public Health with a background as a physician in general practice. He directs a multi-disciplinary research group which undertakes evidence syntheses and economic evaluation on a wide range of health technologies and is deputy director of the PenCLAHRC which aims to improve the influence of research on NHS practice in the UK.