University Hospitals Bristol **NHS**
NHS Foundation Trust

Falls
Evidence Update

October 2017

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Teaching and Learning

Lunchtime Drop-in Sessions

All sessions last one hour

October (12.00-13.00)
Fri 6th Interpreting Statistics
Mon 9th Literature Searching
Tue 17th Critical Appraisal
Wed 25th Interpreting Statistics

November (13.00-14.00)
Thu 2nd Literature Searching
Fri 10th Critical Appraisal
Mon 13th Interpreting Statistics
Tue 21st Literature Searching
Wed 29th Critical Appraisal

Your Outreach Librarian – Helen Pullen

Whatever your information needs, the library is here to help. Just email us at
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Outreach: Your Outreach Librarian can help facilitate evidence-based practice for everyone in the team, as well as assisting with academic study and research. We also offer one-to-one or small group training in **literature searching, critical appraisal and medical statistics**. Get in touch: library@uhbristol.nhs.uk

Literature searching: We provide a literature searching service for any library member. For those embarking on their own research it is advisable to book some time with one of the librarians for a one-to-one session where we can guide you through the process of creating a well-focused literature research. Please email requests to library@uhbristol.nhs.uk

Contents

Updates

NICE National Institute for Health and Care Excellence

[Signal: Group rehabilitation activities improve walking after stroke](#)

Source: [NIHR Dissemination Centre](#) - 12 September 2017

evidence from eight studies (815 people) found no significant difference between groups in the reported number of falls (roughly 13 per...

[WHO | Falls](#)

Source: [World Health Organization](#) - 29 August 2017

WHO fact sheet on falls providing key facts and information on scope of the problem, who is at risk, prevention, WHO response.

[In situ falls training programme](#)

Source: [NHS Improvement](#) - 24 August 2017

The Mid Yorkshire Hospitals NHS Trust has developed a new style of falls prevention training.

[Falls: applying All Our Health](#)

Source: [Public Health England](#) - Source: [GOV UK](#) - 04 August 2017

Evidence and guidance for healthcare professionals to assess risks, advise patients and families and prevent falls.

Cochrane Library

[Treadmill training and body weight support for walking after stroke](#)

Jan Mehrholz , Simone Thomas and Bernhard Elsner
Online Publication Date: August 2017

UpToDate®

OpenAthens login required. Register here: https://openathens.nice.org.uk/

[Falls in older persons: Risk factors and patient evaluation](#) Beta

… about a history of falls; or either provider or patient erroneously believes that falls are an

inevitable part of the aging process. Often, treatment of injuries resulting from a fall does not include investigation …

Risk factors

Falls risk assessment

Summary and recommendations

Causes of falls (Figures)

Prevention falls algorithm (Algorithms)

UpToDate is the leading evidence-based clinical decision support system, designed for use at the point of care.

It contains more than 9,500 searchable topics across the following specialities:

- ❖ Adult and paediatric emergency medicine
- ❖ Allergy and immunology
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- ❖ Endocrinology and diabetes mellitus
- ❖ Family medicine
- ❖ Gastroenterology and hepatology
- ❖ General surgery
- ❖ Geriatrics
- ❖ Haematology
- ❖ Hospital Medicine
- ❖ Infectious diseases
- ❖ Nephrology and hypertension
- ❖ Neurology
- ❖ Obstetrics and gynaecology
- ❖ Oncology
- ❖ Paediatrics
- ❖ Primary care internal medicine
- ❖ Psychiatry
- ❖ Pulmonary, critical care and sleep medicine
- ❖ Rheumatology

How to access UpToDate You can access UpToDate from any computer via www.uptodate.com. You will need your NHS Athens username/password (register through http://openathens.nice.org.uk/).

Database Articles

If you would like any of the following articles in full text, or if you would like a more focused search on your own topic, then get in touch: library@uhbristol.nhs.uk

1. Effectiveness of Environment-Based Interventions That Address Behavior, Perception, and Falls in People With Alzheimer's Disease and Related Major Neurocognitive Disorders: A Systematic Review

Author(s): Jensen, Lou; Padilla, René

Source: The American Journal of Occupational Therapy; 2017; vol. 71 (no. 5); p. 1-10

Publication Date: 2017

Publication Type(s): Journal Article

PubMedID: 77693

Available at The American Journal of Occupational Therapy - from EBSCO (CINAHL with Full Text)

Available at The American Journal of Occupational Therapy - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract:[...]bright-light therapy coupled with melatonin did have some effect in decreasing agitation (Riemersma-van der Lek et al., 2008, Level I). [...]personalized bathing protocols that included person-centered environmental modifications were found to decrease agitation in a Level I study (Zimmerman et al., 2013, Level I SR). [...]a decrease in the number of falls and fallers in a residential facility appeared more directly related to the removal of bed exit and chair alarms (Bressler, Redfern, & Brown, 2011, Level III). [...]limited or insufficient evidence exists for aromatherapy, proprioceptive input, and wander gardens to improve behavior in people with AD and related major NCDs.

Database: BNI

2. Falls in critical care: a local review to identify incidence and risk

Author(s): Richardson, Annette; Carter, Rachel

Source: Nursing in Critical Care; Sep 2017; vol. 22 (no. 5); p. 270

Publication Date: Sep 2017

Publication Type(s): Journal Article

Abstract: Background Patient falls are the most common adverse event in hospitals, resulting in devastating physical, psychological and financial consequences. Therefore the emphasis on falls assessment and prevention is a key priority. Within hospitals those reported at greatest risk of falls are older patients with little known about the factors within critical care. At a local level, a practice development project was identified to review risk factors contributing to falls in critical care. Aims To identify the incidence of falls within adult critical care and the risk factors most likely to contribute to a fall. Methods Reported falls incidents were reviewed retrospectively using a local incident reporting system, over a 2-year period from four critical care units. Findings Forty-two incidents were reviewed indicating a low rate of injury and low rate of occurrence (0·99 falls/1000 bed days). The median age of fallers was 58 years and the most common risk factor for falls was confusion or agitation, followed by patients attempting to mobilize against advice. Discussion Critically ill patients were less likely to fall and were more likely to be younger than patients falling on an acute care ward. Neuroscience/trauma critically ill patients were more likely to fall than general critically ill patients; this was expected to be because of the increased presence of confusion or agitation in this group. The local system used to report falls produced difficulties in identifying risk factors in a consistent way. Although limitations exist, this review has enabled the development of more suitable

local critical care falls risk factor assessment and interventions to minimize the risk of falling. Conclusions Fall rates, related injuries and circumstances of falls vary considerably among acute care and critical care specialities. Future work should concentrate on better falls reporting systems and further research should include validating risk factors for critical care falls.

Database: BNI

3. "Falls prevention among older people and care providers: protocol for an integrative review"

Author(s): Cuesta-Benjumea, Carmen; Henriques, Maria Adriana; Abad-Corpa, Eva; Roe, Brenda; Orts-Cortes, María Isabel; Lidon-Cerezuela, Beatriz; Avendano-Cespedes, Almudena; Oliver-Carbonell, José Luís; Sanchez-Ardila, Carmen

Source: Journal of Advanced Nursing; Jul 2017; vol. 73 (no. 7); p. 1722

Publication Date: Jul 2017

Publication Type(s): Journal Article

PubMedID: 38637

Abstract: Aim To review the evidence about the role of care providers in fall prevention in older adults aged ≥ 65 years, this includes their views, strategies, and approaches on falls prevention and effectiveness of nursing interventions. Background Some fall prevention programmes are successfully implemented and led by nurses and it is acknowledged the vital role they play in developing plans for fall prevention. Nevertheless, there has not been a systematic review of the literature that describes this role and care providers' views on fall's prevention initiatives. Design A convergent synthesis of qualitative, quantitative, and mixed methods studies. The eligibility criteria will be based on participants, interventions/exposure, comparisons, and outcomes for quantitative studies and on population, the phenomena of interest and the context, for qualitative studies. To extract data and assess study qualities members of the research team will work in pairs according to their expertise. The review will follow the guidelines for integrative reviews and the proposed methods will adhere to the PRISMA statement checklist complemented by the ENTREQ framework. As qualitative synthesis are emergent, all procedures and changes in procedure will be documented. Discussion The review has a constructivist drive as studies that combine methods ought to be paradigmatic driven. Review questions are broad to allow issues emerge and have purposefully left the design flexible to allow for adjustments as the review progresses. The review seeks to highlight the roles that care providers play in fall prevention and their views on fall's prevention initiatives.

Database: BNI

Journals: Tables of Contents

Click on the titles (+ Ctrl) for hyperlinks to the journal contents table. If you would like any of these papers in full text then get in touch: library@uhbristol.nhs.uk

Age and Ageing

Journal of the American Geriatrics Society

Library and Information Service

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Teaching and Learning

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Contact your Outreach Librarian:

Helen Pullen

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Ext. 20105