

A Public Health Approach to Prevent Fall-Related Emergency Department Visits of Older Adults

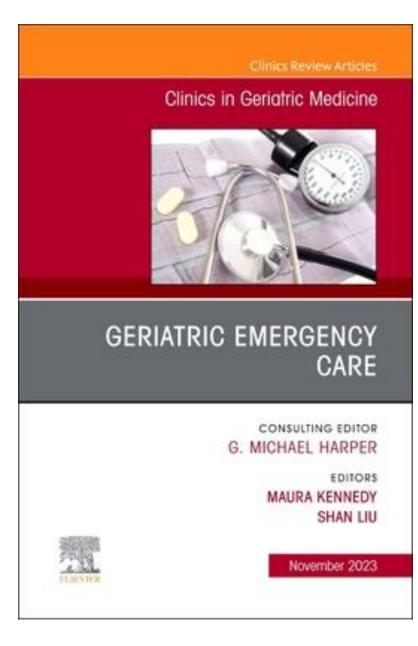
Shan Liu, MD, SD Massachusetts General Hospital

November, 2024 National Acute Care for Elders (ACE) Conference

Confidential—do not copy or distribute

Serious Sentinel Events

Serious Sentinel Events



Serious Sentinel Events Emergency Departments

Key takeaway – Incumbent on us to prevent the next fall – the Emergency department is an ideal location to start fall prevention







Clinics in Geriatric Medicine

nics Review Article

Fall Epidemiology

- One in every three community dwelling older adult falls annually
- 1 million deaths annuals
- Approximately 3 million US ED visits



Tinetti, 1988, CDC, Florence, JAGS 2018 Stevens, 2006, Shankar 2017; PMC9213836/#



Every 20 minutes an older adult dies from a fall in the US. Many more are injured

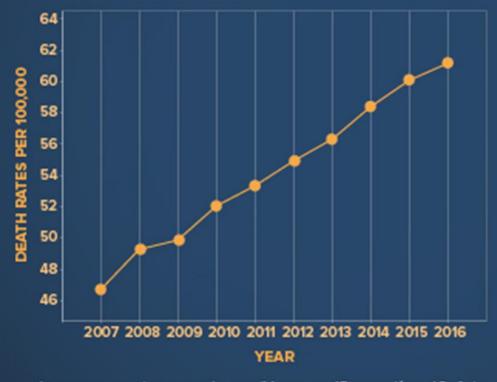


Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™



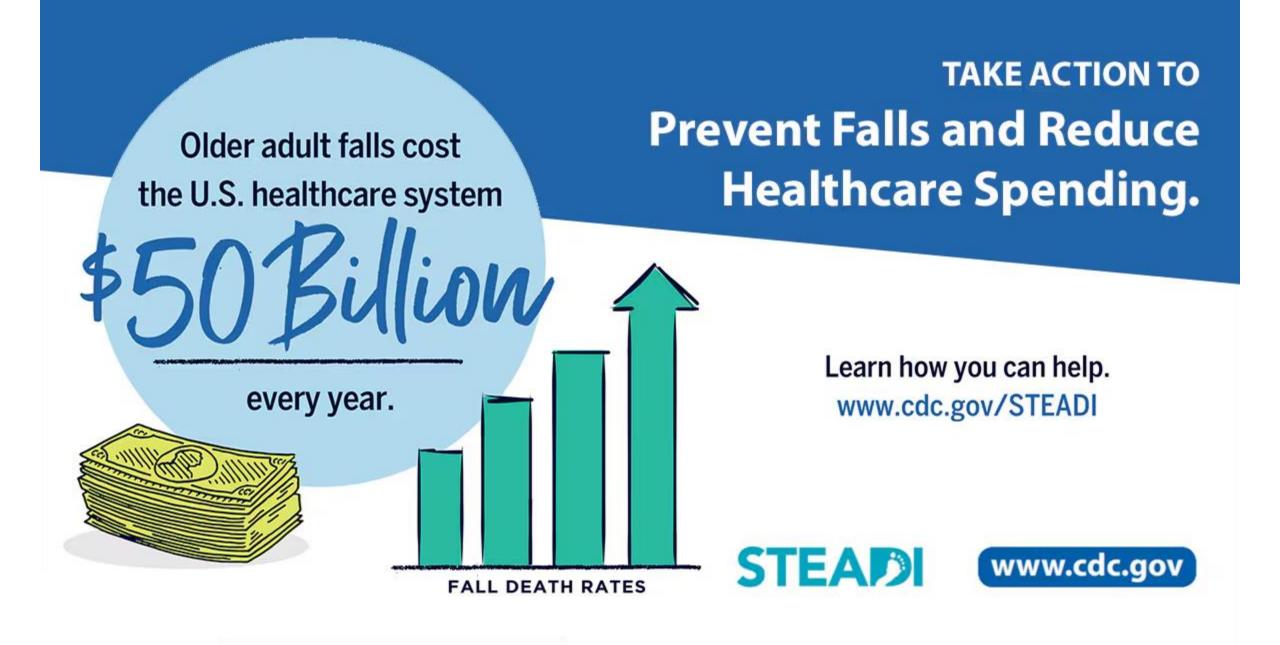
#ICEM22

Fall Death Rates in the U.S. INCREASED 30% FROM 2007 TO 2016 FOR OLDER ADULTS



If rates continue to rise, we can anticipate 7 FALL DEATHS EVERY HOUR BY 2030



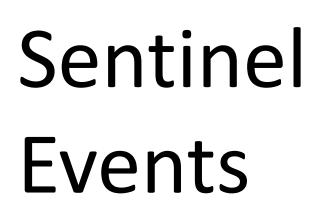


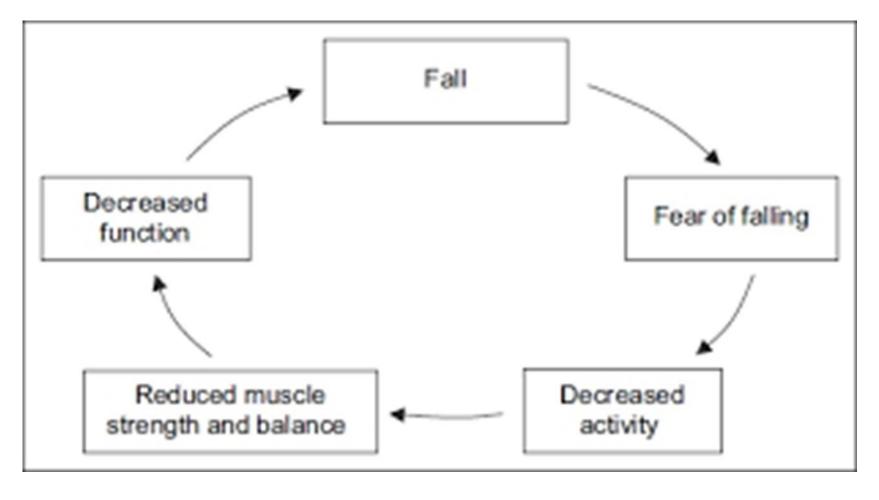
Serious Sentinel Events

Serious Sentinel Events

Previous fall doubles risk of future falls







TJC & CMS News Blog Information for Hospitals

Falls Now Included as Sentinel Events

Jun 14, 2021 by <u>Barrins & Associates</u> Related Posts: <u>Patient Safety</u>, <u>Standards Compliance</u>, <u>The Joint Commission</u>



Falls are a sentinel events that require a sentinel response



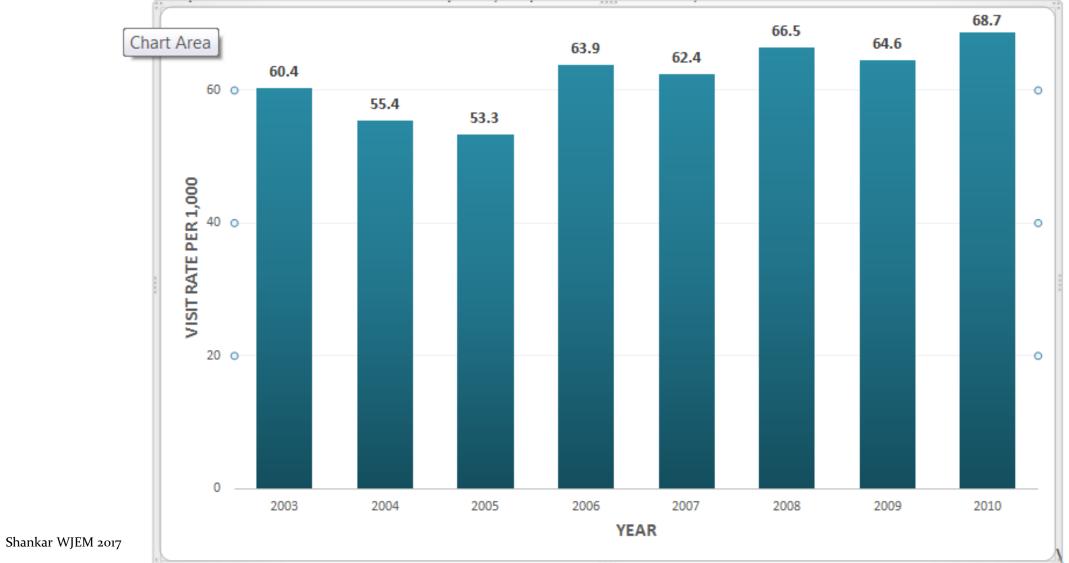


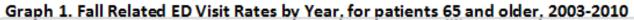
Serious Sentinel Events



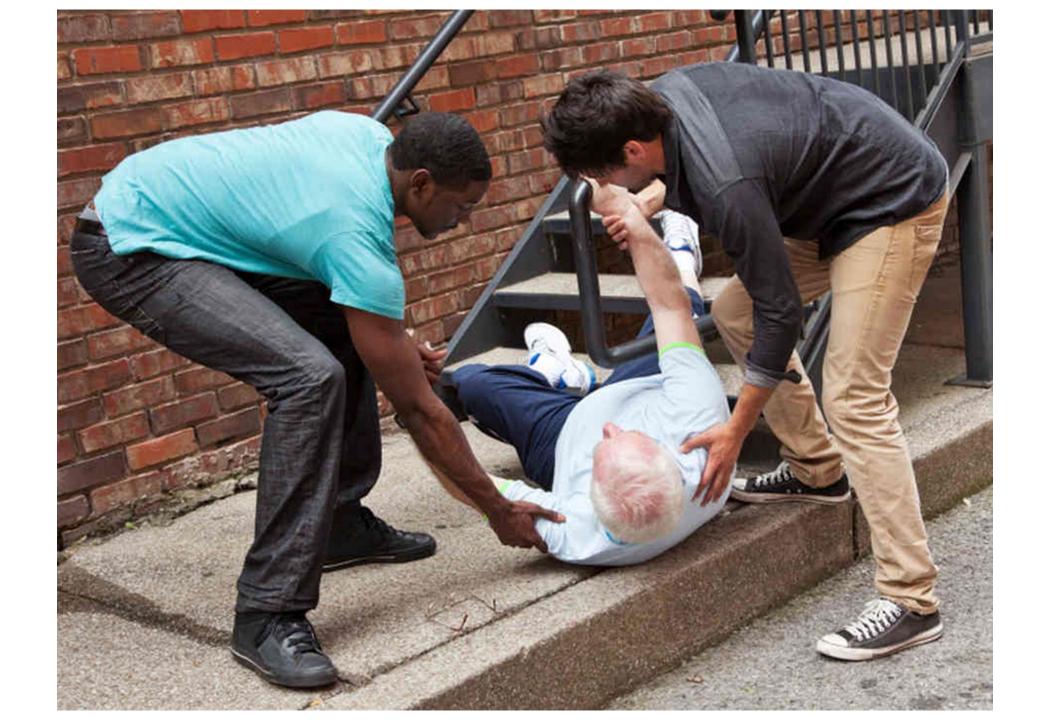
Emergency Departments

Key takeaway – Incumbent on us to prevent the next fall – the Emergency department is an ideal location to start fall prevention









Missed opportunities to prevent falls

N=400 patient charts 87% had modifiable risk factor ED missed opportunities 96%

- High Risk Meds 95%
- Gait abnormality 56%
- Visual acuity 96%



• Davenport, 2020, Ann Emerg Med

ED fall intervention studies

- No effect:
 - Baraff, 1999 AEM
 - Shaw, BMJ 2003 –
 - Russell J Am Ger Soc 2010
- Decrease in falls:
 - Close, Profet study, Lancet 1999 (OR 0.39 after intervention)
 - Davison, 2005 36% reduction in falls
 - Lesser, 2018
 - Goldberg, 2020, GAPCare– aIRR 0.34 fall ED revisit.
 - Harper 2021 Systematic Review multifactorial interventions decreased fall related injuries but not falls





What can we do?

- Identify fall risk ED and international evaluation guidelines
- Interventions
 - ED
 - Multifactorial risk management strategy: needs multiple providers across multiple sites (Primary care, physical therapy, home safety evaluation).



GERIATRIC EMERGENCY DEPARTMENT GUIDELINES





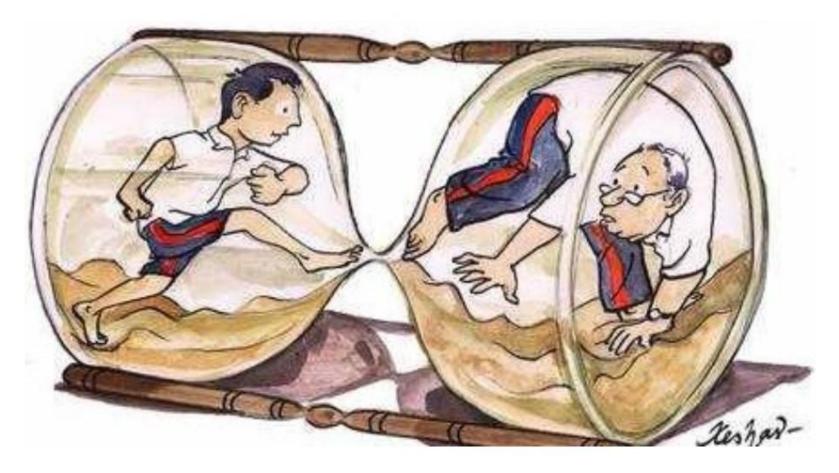
2010 AGS/BGS Clinical Practice Guideline: Prevention of Falls in Older Persons

Summary of Recommendations

The Golden Hour



The time following a traumatic injury when prompt medical treatment has the highest likelihood to prevent death



Trauma Care: The "Golden Hour" Meets the "Golden Years"



Neal Flomenbaum, MD, FACP, FACEP

...

Challenges

Time

Screening/intervention complicated

Do patients want intervention?







Solutions? Hope? Need Innovative Solutions



Innovative Virtual Obs Unit Fall Intervention program

Multi-disciplinary Multifactorial Assessment Timely Comfort of patient's home Use of telemedicine





Paramedics

- Paramedic visits patient next day
- Safety evaluation
- Medication system review
- Timed Up and Go test
- Emergency Physician does telemedicine visit and refers to physical therapy



Conclusion

Serious Sentinel ED Paradigm shift



Thank you! Questions?



Shan Liu, MD, SD Associate Professor of Emergency Medicine Massachusetts General Hospital Harvard Medical School <u>sliu1@mgh.Harvard.edu</u> maskedherobook.com

