

# Falls Prevention Newsletter

## Central and Northern Adelaide Health Service Areas

*A key aim of the Falls Network is to bring together health professionals with an interest in falls prevention.*

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### Happy April Falls Month 2011!!



April Falls Prevention Month is a national awareness opportunity to promote falls prevention amongst consumers, staff and the general public.

We have been busy preparing many exciting activities this month including:

- Developing and delivering over 95 April Falls Prevention Month packs to over 45 different organisations to assist with setting up displays. Packs included; newly developed Falls Prevention posters, a selection of brochures, fact sheets, find-a-words and balloons/signs. Thankyou to Modbury hospital for sending us the first photos of their wonderful displays and activities (pictured).
- 21 falls prevention talks have been scheduled to take place in April at various organisations targeting consumers and health professionals.
- Conducting 3 presentations at the Falls Forum held 8<sup>th</sup> April 2011; Falls Clinics, South Australian Ambulance Service and Dialysis.



Please don't forget to send us photos of your 2011 display. We look forward to seeing the exciting and creative range of health promotion activities undertaken! The best display will win a prize and be featured in the next newsletter!

Please email your photos to [ashleigh.collin@health.sa.gov.au](mailto:ashleigh.collin@health.sa.gov.au) to enter.

## New Falls Prevention Posters Available Now!

3 new posters have been developed by Safety and Quality. A limited supply of hard copies is available on request (email [lisa.elmes@health.sa.gov.au](mailto:lisa.elmes@health.sa.gov.au)).

If you would like an electronic copy please email [ashleigh.scollin@health.sa.gov.au](mailto:ashleigh.scollin@health.sa.gov.au)



## April Falls Forum 2011



The 2011 April Falls Forum was held at Morphettville Junction Centre, Morphettville on April 8<sup>th</sup>. Two-hundred and forty health professionals across the state attended this highly anticipated bi-annual event. Twenty-six sessions were presented, covering a diverse range of falls related topics. Interstate key-note speaker Professor Stephen Lord (pictured), captivated the audience with his presentation on vision and falls. Professor Lord has published over 200 scientific papers and a comprehensive book on Falls in Older people. His methodology and approach to falls-risk assessment has been adopted by many researchers and clinicians across the world.

The AHS, Central and Northern Areas presented:

- Falls Clinics – an evolving model of care for high risk fallers (Diana Pignata and Dr Katherine Lucero).
- Falls Risk Assessment in the Satellite Dialysis Population (Marlena Esposito).
- A targeted Preventative Approach to Falls Prevention in Collaboration with the SA Ambulance Service (Alison Ryan).
- Be a Spotter – Building Capacity in Home Support Workers and Volunteers to Spot Clients Falls Risk Factors (Rosalind Wren and Mary-Anne Dempsey).

Michele Sutherland and Lisa Michelmores once again did a fantastic job organising the day and we look forward to the next Falls Forum in 2013.

## The New Personal Alert Systems Rebate Scheme Has Arrived!

The new **Personal Alert Systems Rebate Scheme** helps frail older South Australians at risk of falls or medical emergencies to obtain a personal alert system, allowing them to live independently in their own homes for longer.

The scheme provides a rebate of:

- up to \$380 for approved applicants for the purchase and installation of approved monitored systems and auto diallers.
- up to \$250 per year for approved applicants for monitoring services for approved monitored systems.

The following web link provides you with further information:

<http://www.sa.gov.au/subject/seniors/Concessions+and+finances/Personal+Alert+Systems+Rebate+Scheme>

## Now Hear this! Hearing and Falls

One in three people over the age of 65 has bilateral hearing impairment, making hearing loss one of the most common chronic health conditions in the elderly (Johnson 2009).

### Why does hearing decline with age?

Degenerative changes can affect various levels of the auditory pathway including:

- The otoliths and ossicles can become brittle or fused (otosclerosis), leading to bony conduction loss
- Sensori-neural hearing loss can occur, affecting the cochlea in the inner ear, with damage to the sensory hair cells in the organ of corti and/or a loss of cochlear neurons
- Central changes can occur in the transmission of impulses across cell membranes in the auditory nerve pathways or the auditory processing areas of the cortex itself. Other factors such as trauma, excessive noise and exposure to toxic drugs can affect the auditory system (Johnson 2009).



### How are hearing and falls connected?

The mechanisms are not fully understood, but in 1999 Enrietto hypothesised;

- Good hearing helps with spatial orientation, an important aspect of avoiding environmental falls hazards.
- If hearing is compromised, greater reliance is placed on other senses to compensate. This can in turn affect one's ability to dual task and result in divided attention during physical activities including walking, which leads to increased falls risk.
- Reduced hearing leads to social isolation and may lead to loss of strength, increasing falls risk further.

### Evidence of hearing loss as a falls risk in elders

In a recent Finnish study, Viljanen analysed whether the level of hearing acuity predicted falls and/or poor performance with balance sway testing with 217 sets of elderly twins. Results indicated that individuals with poorer hearing had greater sway distance than subjects with better hearing. This hearing-balance association was not directly related to genetics.

### Signs and symptoms of hearing impairment:

- Asking others to speak louder or to repeat themselves
- Difficulty following group conversations leading to avoidance of social situations/ social isolation
- Loud television or radio apparent in home environment

### Diagnosis and Management of Hearing loss:

Audiologists and Audiometrists can evaluate the degree of hearing loss but a medial diagnosis is normally made by an ENT specialist.

Management depends on the severity and cause of the impairment. Hearing aids are commonly used and there are many different types available. The government provides eligible clients with a hearing assessment and function.



**Your role**

- ✓ Ask clients about their hearing ability. A commonly used tool is the “Hearing Handicap Inventory for Elderly Screening Questionnaire”.
- ✓ Recommend clients undergo a hearing test every two years after the age of 50 years or if there is any change in hearing, ringing or balance loss.
- ✓ Communicate clearly
- ✓ Provide information about hearing services for eligible clients
- ✓ Encourage the use and maintenance of hearing aids or alternative assistive devices
- ✓ Consider purchasing aids for assistive interviewing e.g. pocket talker.



**References:**

Enrietto JA, Jacobson KM, Baloh RW (1999): Aging Effects on Auditory and Vestibular Responses: A Longitudinal Study. *American Journal of Otolaryngology* 20 (6 Nov-Dec): 371-378

Lowell WG, Jarjoura D and McCord G (1989): Risk of imbalance in elderly people with impaired hearing or vision. *Age and Ageing* 18: 31-34

Viljanen A, Kaprio J, Pyykko I, Sorri M, Pajala S, Kauppinen M, Koskenvuo, and Rantanen T (2009): Hearing as a predictor of falls and postural balance in older female twins. *J Gerontol A Biol Sci Med Sci*. February; 64A (2): 312-317

**Tips for speaking to people with hearing impairment**

- ✓ Seek the client’s attention before speaking
- ✓ Come close before speaking
- ✓ Let them have a clear view of your face and mouth
- ✓ Speak distinctly, but don’t shout.
- ✓ Ask the client if you are speaking at a comfortable volume for them.
- ✓ Speak in short sentences
- ✓ Allow enough response time (people who speech-read may need some seconds to interpret what you said, as not all speech sounds can be read from the lips).
- ✓ Ensure they are wearing hearing aids, if prescribed.

**Hearing Clinic trial:**

Guide Dogs SA.NT Hearing Services is conducting a trial of a new free Hearing Clinic. The aim of the Hearing Clinic is to provide comprehensive information on hearing loss and devices, specific to the individual. This will assist people to confidently make informed choices when accessing services in the hearing industry. Guide Dogs SA.NT does not fit hearing aids.



The trial involves:

- A Hearing Assessment (45 min): a comprehensive hearing test with a qualified clinician, explanation of results and how hearing loss affects the perception of sounds; and
- An Information Session (2 hrs): covers topics such as the hearing system, implications of hearing loss, strategies and tactics for dealing with hearing loss, hearing aids, services that are available and where to access them; and
- Completion of an evaluation form.

Contact Guide Dogs Hearing Services on 1800 383 444 to make a booking

## Recent Falls Network Meeting - Gait Speed a runaway success!



*Gait Speed and Falls* was the topic for the first network session of the year held by the Central/Northern AHS Falls Prevention Team.

Gill Bartley (Program Manager, Falls Prevention Team) presented the session which was run twice, on 8<sup>th</sup> March at Uniting Care Wesley, Prospect and 22<sup>nd</sup> March at GP Plus, Elizabeth. Gill discussed the value of timed gait measures and its interpretation. Timed gait, which is a valid,

reliable, sensitive and easily administered measure, is an important predictor of decline in health and function, future falls and hospitalisation. The ability to control gait is a strong predictor of falls, especially gait variability. The addition of video footage of falls on escalators and road crossing provided attendees with interesting opportunities for discussion and analysis.

The sessions were very popular with a total of 72 health professionals attending, mostly from the community sector with smaller representation from the acute sector and residential care. The sessions were attended mostly by physiotherapists, occupational therapists with representation from allied health assistants, fitness instructors and exercise physiologists. Both sessions received very positive feedback.

The Gait Speed and Slips, Trips and Falls Presentations are now available on the Falls SA website: [www.fallssa.com.au](http://www.fallssa.com.au)

## Introducing our 4<sup>th</sup> Falls Assessment Clinic – Welcome Modbury!!



We are pleased to announce the commencement of the fourth Falls Assessment Clinic in the Central and Northern Adelaide Health Areas, based at the new Modbury GP Super Clinic. Alison Ryan (OT), Marina Vuckov (PT), and Joachim Krack (EN) join together with the RAH geriatrician team to staff this clinic.

The falls clinics provide multidisciplinary assessment for complex, high risk fallers living in the community. The teams provide assessment of modifiable falls risk factors and formulates action plans to address the identified risk factors. Following assessment, referrals are made to local community organisations and services to reduce the individual's risk of further falls and fall related injury.

To refer to a Falls Clinic, use the AHS Central and Northern Areas Falls Assessment Clinic referral form (page 22 of the Falls Prevention Service Directory). Clients referred to the clinics are offered appointments based on clinic proximity and waiting times.

## Want to Join the Central and Northern AHS Falls Network?

There is no cost involved in becoming a member. To join the network- please email [gillian.bartley@health.sa.gov.au](mailto:gillian.bartley@health.sa.gov.au) with your name, profession, place of work and contact details.



By becoming a member, you will receive bi monthly newsletters and information about education sessions and developments in falls prevention.

### NEWSFLASH:

### 1300 0 FALLS to be available across all of metropolitan Adelaide!

Nearly two years ago, the easy to remember 1300 0 FALLS (1300 0 32557) phone number was introduced in the Central and Northern Adelaide Health Areas. Due to its success, the number will be adopted across metropolitan Adelaide in the next few months, providing all health professionals and consumers with a one-stop enquiry number.

### Falls Prevention Service Directory Update



It's that time again! Six months has passed and we are preparing to update our Service Directory once again.

You can help us achieve our goal of providing you with the most current service information.

Please notify a member of the falls prevention team of any changes (however slight!) on 1300 0 32557 or email Ashleigh Scollin on [ashleigh.scollin@health.sa.gov.au](mailto:ashleigh.scollin@health.sa.gov.au) by June 1<sup>st</sup> 2011.

The fourth version of the directory is anticipated for release July 2011.

### Active Ageing has moved:

Please note the following address and phone details for Active Ageing:

105 King William Road,  
Kent Town  
SA 5067  
Phone (08) 8362 5569

## Test Your Knowledge – How much do you know about the Functional Reach Test?

1. Is normative data available?
2. From what age is normative data available?
3. What does this measure tell you about balance?
4. What does this measure tell you about falls risk?
5. How high should the testing arm be raised?
6. Should the test be performed with hand open or closed?
7. Should you record the arm the reach is performed with? Why?
8. A functional reach of < ..... cm predicts falls.
9. Is the functional reach a strong predictor of falls?
10. The functional reach test is included in several tools – can you list two?
11. How should the feet be placed during this test?

*The answers are available at the end of this newsletter.*

## Education Planner 2011 May

### Alzheimer's Australia 14th National Conference

Theme: Take a different view  
Date: 17–20 May, 2011  
Venue: Brisbane Convention and Exhibition Centre on  
Contact: conference secretariat, phone (07) 3255 1002, fax (07) 3255 1004  
email: [info@alzheimers2011.com](mailto:info@alzheimers2011.com)

### New South Wales Falls Prevention Network Forum

Theme: Translating research into practice  
Date: 27 May, 2011  
Venue: Wesley Conference Centre, Sydney  
Contact: phone (02)93991063 or email [e.vance@neura.edu.au](mailto:e.vance@neura.edu.au)

## June

### Getting in early: early balance and bone screening before the trouble starts

Presenters: Professor Nordin, Claudia Meyer and Gill Bartley  
Organisers: Central and Northern Adelaide Falls Prevention Team  
Contact: Gill Bartley 1300 0 32557 (0 FALLS) [gillian.bartley@health.sa.gov.au](mailto:gillian.bartley@health.sa.gov.au)  
Time: 2.30-4.30  
Date: Tuesday, 7th June 2011  
Venue: The Monastery, Glen Osmond

### 2<sup>nd</sup> Biennial National Falls Prevention Summit

Registrations Now Open!  
Organisers: Lauren Greschner – Conference Manager  
Contact: 02 9080 4090 [www.iir.com.au/falls](http://www.iir.com.au/falls)  
Time: 20<sup>th</sup> -21<sup>st</sup> June 2011  
Date: Tuesday, 7th June 2011  
Venue: Hilton Brisbane

## Feature Services

### 1. Australian Hearing

Australian Hearing is a national government organisation which provides a large range of hearing services to eligible adults:

- hearing assessment
- selection and fitting hearing devices
- regular hearing checks to monitor any changes in hearing levels
- Training to improve listening and communication skills
- Counselling about hearing loss

Eligible adults need to apply to the Office of Hearing Services for a Hearing Services Voucher before they can receive hearing services from Australian Hearing or another provider of their choice. A doctor is required to complete part of the form. To find out more about eligibility and applying for vouchers visit the websites (below).

#### Contact information

Phone: **1800 500 726** Telephone Typewriter (TTY): **1800 500 496**

E-mail: [hearing@health.gov.au](mailto:hearing@health.gov.au)

Australian Hearing Website: <http://www.hearing.com.au>

Office of Hearing Services Website: <http://www.health.gov.au/hear>



### 2. HEARING SERVICES

Guide Dogs provides the following Services:

- **Individual consultations** - enabling clients to understand their hearing loss, investigate solutions to hearing difficulties and trial assistive listening devices.
- **The Hearing Resource Centre** contains equipment such as TV devices, telephones, alarm clocks, door bells, personal communicators and smoke alarms.
- **Training courses** - regularly conducted to provide information and skills to enable clients to gain confidence and better manage hearing loss.
- **Support and Friendship Groups** –Presentations are delivered to various self-interest and community groups. Training sessions on hearing loss for aged and disability sector workers can also be provided.
- **Specialised Smoke Alarm Scheme** - funded by the SA Government. Eligible clients with a profound hearing loss are provided with an alarm that delivers an audible, visual and tactile warning. Please phone 8203 8390 for further information.



**Guide Dogs**  
SA.NT your eyes and ears

#### Contact information

251 Morphett St

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SA 5000

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Fax: (08) 8203 8332

Website: <http://www.guidedogs.org.au>



## Test Your Knowledge Answers – Functional Reach Test

1. **Is normative data available?**  
Yes
2. **From what age is normative data available?**  
Normative data is available from 20 – 87 years of age.
3. **What does this measure tell you about balance?**  
Functional reach measures the forward limit of stability.
4. **What does this measure tell you about falls risk?**  
It predicts the risk of recurrent falls in 6 months.
5. **How high should the testing arm be raised?**  
90 degrees. If the patient is unable to raise the affected arm, the distance covered by the acromion can be recorded.
6. **Should the test be performed with hand open or closed?**  
The hand should be fist and the level of the 3<sup>rd</sup> MCP joint is used to measure the distance reached.
7. **Should you record the arm the reach is performed with? Why?**  
Yes – for consistency with re-assessment.
8. **How should the feet be placed during this test?**  
The feet should be spaced shoulder width apart
9. **A functional reach of < ..... cm predicts falls.**  
A functional reach of:
  - < 15cm indicates significant increased falls risk (4 times more likely to have 2 falls in 6 months)
  - 15 - 25cm indicates a moderate risk of falls (2 times more likely to have 2 falls in 6 months).
  - 0 cm indicates the individual is 8 times more likely to have 2 falls in 6 months.
10. **Is the functional reach a strong predictor of falls?**  
The functional reach has been found to have a high predictive validity in identifying *recurrent* community dwelling elderly fallers.
11. **The functional reach test is included in several tools – can you list two?**
  - Berg Balance
  - Elderly Mobility Scale

### See Functional Reach Easy Reference Sheet for additional information (attached)

#### References:

Duncan, PW, Weiner DK, Chadler J, Studenske S. Functional reach: A new clinical measure of balance. J Gerontol. 1990; 45:M192.

Duncan, PW, et al: Functional reach: Predictive validity in a sample of elderly male veterans. J Gerontol. 1992; 47:M93.

Mann, GC, et al: Functional reach and single leg stance in patients with peripheral vestibular disorders. J Vestib Res. 1996; 6:343.

Weiner, DK, et al: Does functional reach improve with rehabilitation. Arch Phys Med Rehab. 1993; 74:796.

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#### For more information

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