An Integrated Community Falls Emergency Pathway

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Abstract

The abstract gives an example of both an innovation to integrated care and an example of good practice: an Integrated Community Falls Emergency Pathway.

Most adults fall each year. The consequences of a fall become more serious with both increasing age and the presence of multiple morbidities. In Scotland, a fall is the most common reason a person over the age of 65 years contacts the emergency services, resulting in the most frequent reason for a ‘call-out’ by an ambulance from the Scottish Ambulance Service (SAS). Without an appropriate alternative, ‘falls’ become the most common reason for presentation by older adults to Emergency Departments (EDs).

However, not all falls result in an injury that requires either conveyance to the ED, or admission into secondary care. Furthermore, evidence suggests admissions to secondary care can be detrimental to the health and well-being of people with multiple morbidities, and can result in a reduction in functional ability, social isolation and iatrogenic infection. Thus, alternatives to ED conveyance for treatment of the outcomes of non-injurious falls are urgently sought.

The City of Edinburgh worked to develop an Integrated Care Pathway for treatment of non-injurious falls in the community; the Community Emergency Falls Pathway. The pathway links the SAS, Social Care Direct and Intermediate Care with the fallen person in order to provide multifactorial falls assessment and intervention in the most appropriate location, often at home. This includes a full review of falls risk factors, environmental assessment and strength and balance training. Initial outcomes show that as well as reduced presentations to the ED, admissions to secondary care through the ED can be avoided, bed-days saved and future admissions prevented.

Keywords

emergency services; falls prevention; intermediate care

PowerPoint presentation

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