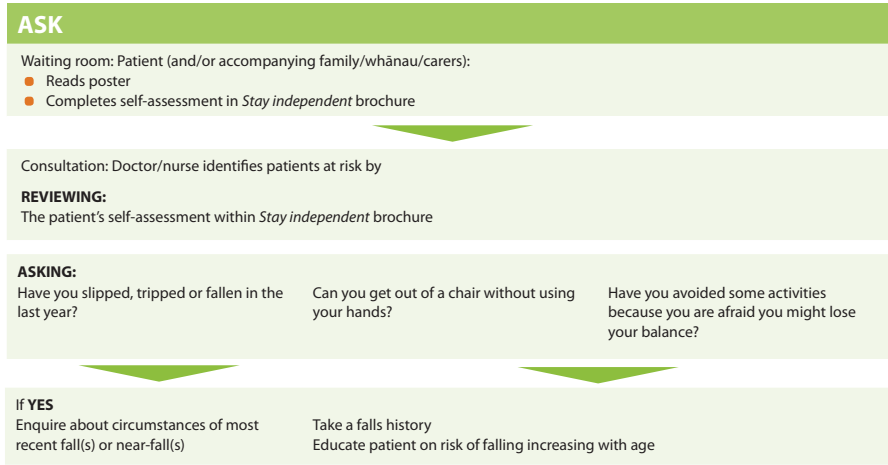
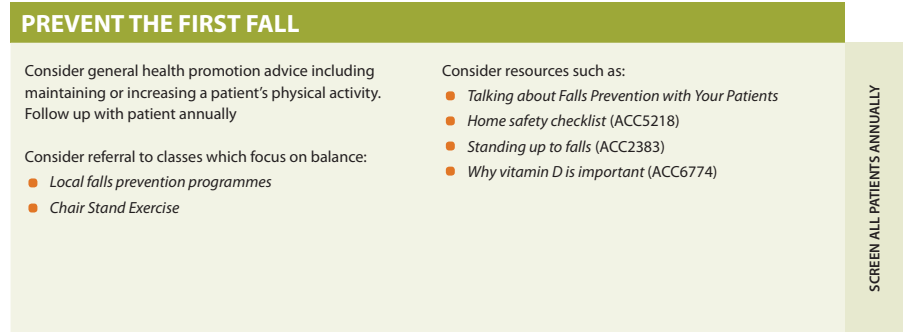


# Falls Algorithm



If **NO** to all 3 questions and self-assessment items



SCREEN ALL PATIENTS ANNUALLY

ASSESS		ACT		Processes and tools/resources		Specialist input or referral as needed	
PHYSICAL ACTIVITY	Balance, strength and gait	▶ Enhance balance and strength	▶	Use one or more of:	▶	Refer to a Physiotherapist for:	TARGETED TO THOSE AT RISK: MULTI-FACTORIAL ASSESSMENT AND INTERVENTIONS
	Mobility	▶ Improve or assist mobility	▶	<ul style="list-style-type: none"> <li>● <i>Timed Up and Go (TUG test)</i></li> <li>● <i>30 second Chair Stand test</i></li> <li>● <i>Four-Stage Balance test</i></li> </ul>	▶	<ul style="list-style-type: none"> <li>● Assessment of gait and balance</li> <li>● One-on-one progressive gait and balance retraining</li> <li>● Strengthening exercises</li> <li>● Recommending and teaching correct use of assistive devices</li> </ul>	
	Muscle strength and tone (especially lower limb)	▶ Prescribe vitamin D supplements if at risk of deficiency	▶	Neurological examination:	▶	Refer for a Green Prescription or to a falls prevention programme. For patients aged over 80 years; consider referral to a home-based programme. Contact Green Prescription co-ordinators (for a list see the Ministry of Health website) or ACC community injury prevention consultants for a list of local falls prevention programmes (enquire at: information@acc.co.nz).	
	Feet and/or shoes	▶ Address foot problems and ensure safe footwear	▶	Examine feet for structural abnormalities, deficits in sensation and proprioception, ask if patient experiences any foot pain. Evaluate footwear (see: <i>Standing up to falls ACC2383</i> )	▶	Refer to a Podiatrist for:	
UNDERLYING CONDITIONS	Medicines (especially psychotropics)	▶ Review and optimise medicine use	▶	Taper and stop psychotropic medicines if there are no clear indications or evidence of benefit, otherwise reduce doses if possible and increase non-pharmacological treatments Monitor patient as they make recommended changes.	▶	<ul style="list-style-type: none"> <li>● Assessment and treatment of foot problems</li> <li>● Prescription of corrective footwear or orthotics</li> </ul>	
	Dizziness or postural hypotension	▶ Manage and monitor hypotension	▶	Check supine and standing orthostatic blood pressure using <i>Measuring Blood Pressure: Detecting Postural Hypotension</i> Cardiovascular examination, rate and rhythm of pulse Discuss with patient and give information on postural hypotension Recommend medicine changes to reduce hypotension Monitor patient as they make recommended changes	▶	Follow up as appropriate	
	Cognition	▶ Address any cognition problems	▶	Assess for cognitive impairment and depression	▶	Follow up as appropriate	
	Vision	▶ Optimise vision	▶	Assessment for visual impairment Discuss increased falls risk with bi-focal and multifocal lenses with patient	▶	Refer for specialist input if appropriate	
	Continence problems	▶ Manage continence problems	▶	Consider urgency caused by diuretics or laxatives	▶	Refer to an Optometrist or Ophthalmologist for:	
	Any other health problems that may increase the risk of falling	▶ Address other health problems	▶	Discuss with patient and family increased falls risk from certain conditions, stroke, parkinsonism, motor neurone disease	▶	<ul style="list-style-type: none"> <li>● Identification and treatment of medical conditions contributing to vision problems</li> <li>● Problems with visual acuity and contrast sensitivity</li> </ul>	
	Home safety	▶ Optimise home safety	▶	Counsel patient about reducing fall hazards. Give information on reducing hazards in the home:	▶	Refer for specialist input if appropriate	
			<ul style="list-style-type: none"> <li>● <i>Home safety checklist</i> (ACC 5218)</li> <li>● <i>Standing up to falls</i> (ACC2383)</li> </ul>	▶	Refer patients at higher risk of falling to an occupational therapist for home safety assessment and modification:		
				▶	<ul style="list-style-type: none"> <li>● Assess safety and the patient's ability to function in the home</li> <li>● Arrange for installment of rails and other aids if required</li> </ul>		