

**Report to
Rapport au:**

**Ottawa Board of Health
Conseil de santé d'Ottawa
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Ward: CITY WIDE / À L'ÉCHELLE DE LA VILLE File Number: ACS2015-OPH-HPDP-0005

SUBJECT: OTTAWA PUBLIC HEALTH'S FALL PREVENTION APPROACH

**OBJET: APPROCHE DE PRÉVENTION DES CHUTES DE SANTÉ PUBLIQUE
OTTAWA**

REPORT RECOMMENDATIONS

That the Board of Health for the City of Ottawa Health Unit approve Ottawa Public Health's (OPH's) Fall Prevention Approach which aims to reduce falls among adults 65 years and older and focuses on five priority areas, as outlined in this report.

RECOMMANDATIONS DU RAPPORT

Que le Conseil de santé de la circonscription sanitaire de la ville d'Ottawa approuve l'approche de prévention des chutes de Santé publique Ottawa (SPO), qui vise à réduire les risques de chute chez les personnes âgées de 65 ans et plus et qui met l'accent sur cinq éléments clés, tel que décrit dans le présent rapport.

EXECUTIVE SUMMARY

Falls among adults 65 years and older is a complex community issue that represents a tremendous health and economic burden to individuals, families and societies. In Ottawa, falls are the leading cause of injury-related emergency room visits and hospitalization. As Ottawa's population 65 years and older is the fastest growing age group and is predicted to grow from 14.6 percent in 2015 to 21.0 percent in 2030, falls among older adults will continue to be a public health concern.¹

Ottawa Public Health's (OPH's) effort to reduce falls among adults 65 years and older is driven by key influencers, including epidemiological results, requirements from the Ministry of Health and Long-Term Care (MOHLTC), a partnership with the Champlain Local Health Integration Network (LHIN), the City of Ottawa's *Older Adult Plan*, as well as efforts to build on the success of previous OPH initiatives.

OPH is committed to reducing falls and improving access to services for older adults.

Together with community partners, OPH will implement its Fall Prevention Approach which aims to reduce falls among adults 65 years and older and focuses on five priority areas:

1. Monitoring and reporting falls-related statistics;
2. Engaging key stakeholders to improve fall prevention health care services;
3. Expanding access to physical activity programming and products for older adults in the community;
4. Enhancing older adult environments to reduce falls; and
5. Engaging older adults in fall prevention behaviours.

RÉSUMÉ

Les chutes chez les adultes de 65 ans ou plus constituent un problème communautaire complexe qui représente un énorme fardeau sur le plan sanitaire et financier pour les particuliers, les familles et la société. À Ottawa, les chutes sont la principale cause des

consultations en urgence et des hospitalisations pour blessures. Puisque la population de 65 ans ou plus à Ottawa est le groupe d'âge qui connaît l'expansion la plus rapide et devrait passer de 14,6 % de la population en 2015 à 21 % en 2030, les chutes chez les aînés demeureront un problème de santé publique².

Les efforts déployés par Santé publique Ottawa (SPO) pour réduire le nombre de chutes chez les adultes de 65 ans ou plus sont motivés par plusieurs facteurs clés, notamment les résultats épidémiologiques, les exigences du ministère de la Santé et des Soins de longue durée (MSSLD), un partenariat avec le Réseau d'intégration des services de santé de Champlain, le *Plan relatif aux personnes âgées* de la Ville d'Ottawa ainsi que les mesures visant à faire fond sur le succès des initiatives antérieures de SPO.

SPO est déterminé à réduire le nombre de chutes et à améliorer l'accès des aînés aux services.

De concert avec ses partenaires communautaires, SPO mettra en œuvre son approche de prévention des chutes, qui vise à réduire le nombre de chutes chez les adultes de 65 ans ou plus en mettant l'accent sur cinq secteurs d'intervention prioritaires :

1. Surveillance des statistiques relatives aux chutes et établissement de rapports connexes;
2. Mobilisation des intervenants clés pour améliorer les services de santé visant la prévention des chutes;
3. Amélioration de l'accès des aînés aux programmes et produits d'activité physique dans la collectivité;
4. Amélioration de l'environnement des aînés pour réduire le nombre de chutes; et
5. Mesures visant à inciter les aînés à adopter des comportements de prévention des chutes.

BACKGROUND

Falls among adults 65 years and older is a complex community issue. Collective action across jurisdictions, caregivers and individuals is needed for preventing and reducing the severity of falls related injuries in Ottawa's older adults. Ottawa Public Health's (OPH's) effort to reduce falls among adults 65 years and older is driven by key influencers, outlined in Document 1, including epidemiological results, requirements from the Ministry of Health and Long-Term Care (MOHLTC), a partnership with the Champlain Local Health Integration Network (LHIN), the City of Ottawa's existing and

proposed *Older Adult Plans*, as well as efforts to build on the success of previous OPH initiatives.

Older Adult Falls in Ottawa

Falls represent a tremendous health and economic burden to individuals, families and societies. In Ontario, falls across the lifespan were the leading cost of injuries in 2010, accounting for \$2.8 billion in spending (\$2.1 billion in direct health care and \$700 million in indirect costs).³

In Ottawa, falls are the leading cause of injury-related emergency room visits and hospitalization. Every year, approximately one fifth of adults 65 years and older who live in private homes fall,⁴ contributing to over 8200 visits to the emergency department, 2138 hospitalizations and approximately 90 deaths.^{5,6,7} This will continue to be a public health concern as Ottawa's population 65 years of age and over is the fastest growing age group and is predicted to grow from 14.6 percent (140,136) in 2015 to 21.0 percent (247,973) in 2030.⁸ Of particular concern are adults 85 years and older, a group that has significantly higher rates of falls.^{9,10}

In 2012, OPH conducted an [Older Adults Falls Prevention Survey](#) to better understand the knowledge and behaviours of local older adults about falls. The results revealed that nine out of ten older adults perceive falling as a preventable health concern however; many are not taking the necessary steps to prevent falls. In general, older adults are not optimally using home safety devices, many are not aware that medications may increase their risk of falls, many need more vitamin D and calcium, and fewer than half of older adults are getting the right amount or the right type of physical activity.¹¹

OPH Activities

In January 2014, the Board of Health received OPH's [Senior's Healthy Aging Strategy Update](#) which outlined OPH's commitment to focus on reducing falls and improving access to services for older adults through engaging primary care providers, increasing physical activity opportunities for older adults and working with municipal partners as part of the 2012-2014 Older Adult Plan. In 2014-2015, OPH continued to collaborate with municipal partners, the Council on Aging, the Regional Geriatric Advisory Committee, Community Health and Resource Centres, the Champlain LHIN, Community Care Access Centre, Pinecrest-Queensway Community Health Centre, retirement homes, and Aging in Place buildings resulting in the following:

- **Increasing access to fall prevention programming and services**

- OPH was awarded the contract by Pinecrest-Queensway Community Health Centre to provide free strength and balance exercise classes for adults 65 years and older. This funding was made possible by the Champlain LHIN. In collaboration with the City's Parks, Recreation and Cultural Services Department, OPH developed a 12 week fall prevention progressive exercise and education program, *Better Strength Better Balance/En force en équilibre (BSBB/EFEE)*. Since September 2014, more than 2300 older adults have participated in the program. Program evaluation results show an increase in participants' self reported strength and balance, intention to continue to exercise, a reduced fear of falling as well as reports of increased social support.
- In 2015, OPH coordinated with the Canadian Council of the Blind's Mobile Eye Clinic to provide comprehensive Ontario Health Insurance Plan covered eye exams to Aging in Place buildings in Ottawa. Having an annual eye exam is a key action older adults can take to reduce their risk of falling. This initiative reached over 100 vulnerable older adults who otherwise would not have received services. Results showed the majority had not been to an optometrist in several years, two-thirds had eye conditions that required follow-up such as cataracts and macular degeneration and approximately 50 percent needed new prescriptions.

- **Raising awareness of behaviours that reduce fall risk**

- In 2014, OPH launched its fall prevention public awareness campaign *Taking Care of My Health* which profiled the primary behaviours that would reduce falls risks. Key messages of the campaign included the importance of safe environments, strength and balance exercises, calcium rich foods and vitamin D supplementation, annual check-up (physical exam, eye exam and medication check) and reporting falls to health professionals.

- **Outreach for fall prevention education and early identification**

- OPH provided fall prevention health education sessions to older adults in community settings such as senior centres, faith groups, libraries, older adult apartments and in vulnerable settings such as Ottawa Community Housing. Over 350 fall prevention health education sessions took place from October 2014 to June 2015.
- Early in 2014, OPH staff assessed risk of falling of older adults through community fall prevention screening clinics. The clinics were discontinued

- when a self screening tool ([the Staying Independent Checklist/Préserver votre autonomie](#)) became available for older adults and caregivers to use to assess falls risk factors.
- OPH worked with OC Transpo to include fall prevention key messages in the travel training resource for older adults.
 - **Capacity building**
 - OPH worked with older adult service providers including retirement homes and senior centres to provide fall prevention education and awareness. More than 90 percent of service providers reached intend to include fall prevention activities in their practice.
 - **Policy development**
 - OPH worked with Ottawa Community Housing and developed a fall prevention checklist assessing public areas in apartment buildings to reduce falls in older adults. Ottawa Community Housing will be piloting the checklist in its buildings. The checklist was also shared with the City of Ottawa's Infrastructure Services Department for consideration in retrofits and upgrades to municipal facilities as part of the proposed 2015-2018 *Older Adult Plan*.

DISCUSSION

The need to address falls in Ottawa with adults 65 years and older continues to be a priority for OPH. With existing and continued support from City and community partners, OPH is recommending to the Board of Health a renewed Fall Prevention Approach. Aligning with the Champlain [Fall Prevention Strategy](#) and the City's proposed 2015-2018 *Older Adult Plan*, OPH's Fall Prevention Approach, outlined in Document 2, aims to reduce falls among adults 65 years and older and focuses on five priority areas:

1. Monitoring and reporting falls-related statistics

The MOHLTC requires OPH to monitor and report the burden of falls in Ottawa.¹² Timely monitoring will help inform the impact of falls on the local health care system. OPH will conduct surveillance of falls among older adults in Ottawa to inform public health and community programming, including:

- Monitoring falls-related emergency department visits, hospitalizations and mortality among older adults across Ottawa and sharing relevant results with community partners; and

- Conducting an assessment of community-based older adults in 2017 to determine change in knowledge and behaviours of local older adults since 2012 and further inform program priorities.

2. *Engaging key stakeholders to improve fall prevention health care services*

The prevention and response to falls among older adults is a shared challenge and can best be achieved through continued multisectoral collaboration, including governments, health care providers, non-government organizations, care associations and services, as well as caregivers and individuals¹³. OPH will partner with the Champlain LHIN, the Regional Geriatric Program of Eastern Ontario and associated public health units in the Regional Geriatric Advisory Committee Fall Prevention Working Group to improve fall prevention health care services by:

- Promoting the self-screening tool, [Staying Independent Checklist/ Préserver votre autonomie](#), for older adults to take to their primary care provider for further assessment;
- Promoting the fall assessment clinical algorithm with primary care providers; and
- Strengthening the collaboration between community pharmacists and primary care for medication reviews.

3. *Expanding access to physical activity programming and products for older adults in the community*

Exercise programs designed with fall prevention criteria can prevent and reduce the severity of falls injuries in older adults¹⁴ and show an overall return of investment¹⁵. Effective fall prevention exercise programs are tailored to the individual; provided at the right level and allow participants to progress¹⁶. The *BSBB/EFEE* program has proved to be a point of entry for many older adults to physical activity programming. However, evaluation results have identified a need for programs after “graduating” from *BSBB/EFEE*, to sustain health benefits. Further, there is a lack of programming for older adults too frail to take part in the *BSBB/EFEE* program.

OPH will expand access of physical activity, strength and balance programming and products by:

- Partnering with community agencies, including the Community Care Access Centre and Parks, Recreation and Cultural Services, to increase availability of strength and balance programming and products. OPH will work with Parks, Recreation and Cultural Services to review the current complement of older adult

physical activity programming and work towards increasing accessibility of progressive strength and balance programs;

- Raising awareness of physical activity programs for older adults with a focus on strength and balance. For example, OPH will use electronic mechanisms to increase availability of strength and balance programming with various level of activity and language; and
- Improving navigation for older adults to fall prevention exercise programs and products. For example, OPH will continue to work with the Champlain LHIN to increase awareness of exercise programming for older adults to more clearly identify appropriate exercise programming with consideration of age, physical ability, geography, language and cost.

4. Enhancing older adult environments to reduce falls

Physically and socially supportive environments prevent and reduce the number of falls in older adults¹⁷. Physical environment risk factors associated with falls include the design of a building, entrances and outdoor spaces and the types of furniture and other objects in rooms (have been related to 40-60 percent of falls)¹⁸. The use of environmental assessments and modifications create a safer environment.¹⁹

OPH will create and enhance safe and supportive environments by:

- Providing training to front line service providers, such as personal support workers and volunteers, on how to incorporate fall prevention interventions when providing care to older adults;
- Supporting retirement homes to adopt best practices to reduce falls. For example, staff training, on site exercise programs, tools for environmental audits;
- Identifying opportunities to advocate for safer homes and public spaces through modification of home environments and the use of home safety devices; and
- Advancing the Age-Friendly Ottawa initiative and the City of Ottawa's proposed 2015-2018 *Older Adult Plan* by improving outdoor spaces and City buildings.

5. Engaging older adults in fall prevention behaviours

Risk factors for falls are complex and interactive and are often a combination of biological, behavioural, environmental and socio-economic conditions²⁰. The more risk factors an individual has, the greater the risk of having a fall²¹. OPH will continue to engage older adults and caregivers in actively reducing fall risks by:

- Promoting the importance of the six fall prevention behaviours that can reduce falls. These include: the importance of safe environments, strength and balance

exercises, calcium rich foods and vitamin D supplementation, annual check-ups (physical exam, eye exam and medication check) and reporting falls to health professionals; and

- Increasing awareness of and access to the screening tool [Staying Independent Checklist/ Préserver votre autonomie](#).

Next Steps

OPH together with community partners will implement its Fall Prevention Approach which focuses on five priority areas. As Ottawa's population aged 65 and older is predicted to grow rapidly from 14.6 percent in 2015 to 21.0 percent in 2030, integrating services for preventing falls will become increasingly important. Community investment and effort is required to address falls prevention through continued collaboration with healthcare partners, municipal partners, and older adults and caregivers.

RURAL IMPLICATIONS

Improving fall prevention for individuals, environments, communities and the health care system will impact all older adults in Ottawa, regardless of geographical location. More specifically, improving access of fall prevention exercise programming and transportation needs has been incorporated within planning and implementation.

CONSULTATION

In order to align with key City and regional commitments, Parks, Recreation and Cultural Services, Champlain LHIN Fall Prevention Work Group, the City's *Older Adult Plan* and Age-Friendly Ottawa representatives have been consulted on OPH's Fall Prevention Approach.

LEGAL IMPLICATIONS

There are no legal impediments to the implementation of the recommendation in this report.

RISK MANAGEMENT IMPLICATIONS

There are no risk management implications to receiving this report.

FINANCIAL IMPLICATIONS

There are no financial implications to receiving this report.

ACCESSIBILITY IMPACTS

There are no accessibility implications to receiving this report.

TECHNOLOGY IMPLICATIONS

There are no technology implications to receiving this report.

SUPPORTING DOCUMENTATION

Document 1: Key Influencers to Ottawa Public Health's Fall Prevention Approach

Document 2: Ottawa Public Health's Fall Prevention Approach

DISPOSITION

OPH will implement the recommendation of this report.

¹ Ottawa Population Projections. Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO. Date Extracted: May 14, 2015.

² *Projections démographiques pour Ottawa*, ministère de la Santé et des Soins de longue durée de l'Ontario, *savoirSANTÉ* ONTARIO. Données extraites le 14 mai 2015.

³ Parachute. (2015). *The Cost of Injury in Canada*. Parachute: Toronto, ON

⁴ Rapid Risk Factor Surveillance System (RRFSS) – 2014 [database]. Ottawa: Ottawa Public Health 2015.

⁵ Falls-related unscheduled emergency department visits 2014. National Ambulatory Care Reporting System. IntelliHEALTH Ontario, MOHLTC. Extracted May 6, 2015. (ICD-10-CA: W00-W19).

⁶ Falls-related hospitalizations 2014. Discharge Abstract Database. IntelliHEALTH Ontario, MOHLTC. Extracted August 11, 2015. (ICD-10-CA: W00-W19).

⁷ Falls-related mortality 2009-2011. Ontario Mortality Data. IntelliHEALTH Ontario, MOHLTC. Extracted August 11, 2015. (ICD-10-CA: W00-W19).

⁸ Ottawa Population Projections. Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO. Date Extracted: May 14, 2015.

⁹ Falls-related unscheduled emergency department visits 2014. National Ambulatory Care Reporting System. IntelliHEALTH Ontario, MOHLTC. Extracted May 6, 2015. (ICD-10-CA: W00-W19).

¹⁰ Falls-related hospitalizations 2014. Discharge Abstract Database. IntelliHEALTH Ontario, MOHLTC. Extracted August 11, 2015. (ICD-10-CA: W00-W19).

¹¹ Ottawa Public Health. Summary of Results – Older Adults Falls Prevention Survey, 2012. Ottawa (ON): Ottawa Public Health, 2013. Available at:

http://documents.ottawa.ca/sites/documents.ottawa.ca/files/documents/seniors_summary_en.pdf

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http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/ophs_2008.pdf
- ¹³ Public Health Agency of Canada. 2014. Seniors' Falls in Canada – Second Report. Available from
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http://www.publish.csiro.au/?act=view_file&file_id=NB10056.pdf
- ¹⁵ Kulis C, et al. 2014. Cost benefit analysis of three older adult fall prevention interventions.
- ¹⁶ Age UK Expert Series: Fall Prevention Exercise – Following the Evidence. 2013. Retrieved from
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http://www.phac-aspc.gc.ca/seniors-aines/publications/public/injury-blessure/seniors_falls-chutes_aines/assets/pdf/seniors_falls-chutes_aines-eng.pdf
- ¹⁸ Fleming BE, Pendergast DR. Physical condition, activity pattern, and environment as factors by adult care facility residents. Arch Phys Med Rehabil. 1993; 74(6):627-30.
- ¹⁹ Panel on fall prevention in older persons, American Geriatrics Society and British Geriatric Society. Summary of the Updated American Geriatrics Society/British Geriatrics Society Clinical Practice Guideline for Prevention of Falls in Older Persons. J AM Geriatr Soc. 2011; 59(1): 148-157
- ²⁰ Public Health Agency of Canada. 2014. Seniors' Falls in Canada – Second Report. Available from
http://www.phac-aspc.gc.ca/seniors-aines/publications/public/injury-blessure/seniors_falls-chutes_aines/assets/pdf/seniors_falls-chutes_aines-eng.pdf
- ²¹ Safer Healthcare Now. Reducing Falls and Injuries from Falls: Getting Started Kit. Canadian Patient Safety Institute, June 2013.