

FIRST STEP FALL PREVENTION PROGRAM EVALUATION

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Background and Purpose

The First Step Program was developed and implemented by the Burnaby Coalition to Prevent Falls in the Community. This program consisted of a self-help booklet "The First Step: Fall Prevention Starts with You" aimed to help seniors assess their risks for falls and determine preventive action.



Process

The Booklet

The booklet contained:

- fall risk questionnaire
- information on causes of risks
- actions the senior could take to reduce risks
- list of community contacts, health care and other professionals appropriate to aid in reducing risks
- planning sheet to help guide and implement an action plan

Program Delivery

Group 1: Launch

- received the booklet as part of a half-day launch event
- launch program consisted of a review of the use of the booklet
- a tour of 14 "interactive risk stations" hosted by resource people (ie. Pharmacist discussing risks of medication use, Podiatrist discussing risks of foot problems)
- lectures by experts and guests

Group 2: Mail Out

- as a result of media coverage from launch, a number of seniors contacted the Burnaby Coalition to receive the booklet by mail.

Group 3: Residents

- received booklet and attended one of two presentations conducted at a seniors' lodge in Burnaby
- Coordinator of Acute Geriatric Care at Burnaby Hospital distributed booklet, made a presentation and conducted interactive workshops at two local seniors lodges.

Evaluation Objectives

The B.C. Injury Research and Prevention Unit in collaboration with the Burnaby Coalition developed the evaluation plan which consisted of the following four objectives:

- 1) assess booklet use, behavioral changes to reduce risks and satisfaction with the booklet format and content
- 2) assess the most frequently identified risk factors and preventive actions taken
- 3) determine how program delivery methods contributed to the use of the booklet and seniors' preventive actions
- 4) assess major steps and factors in program development through a coalition process.

Methods

Telephone interviews were conducted with two groups of seniors: those who requested the booklet by mail and those who attended the half-day launch event. In-person interviews were conducted with the seniors attending group presentations (the residents group) using a pre-tested, structured questionnaire. A focus group was conducted with six members of the coalition. Both quantitative and qualitative methods were used to analyze interview data and questionnaire responses.

Overall Results

Participants of First Step Program

Type	Total	Respondents	Percentage of Total
Launch	58	25	43
Mail-out	57	20	35
Residents	100	20	20
Total	215	65	30

Recruitment of Respondents

	Launch		Mail-out	
	Number	%	Number	%
Letters mailed out	58	100	57	100
Unreachable	10	17	11	19
Refused interview	9	16	12	21
Unable to participate/illness	7	12	8	14
Don't remember receiving booklet	6	10	3	5
Did not receive booklet	1	2	3	5
Total Interviews	25	43	20	35

Residents (n=20) were a convenience sample recruited by Seniors' Lodge Staff

Primary Objectives

Program Delivery	Read Booklet		Used Booklet to Identify Major Risk Factors		Used Planning Sheet*	
	Yes	No	Yes	No	Yes	No/CR ¹
Launch	96 %	4 %	59 %	33 %	4 %	96 %
Mail-out	100 %	0	79 %	21 %	21 %	79 %
Residents	95 %	3 %	65 %	35 %	0	100%

* indicates statistical significance $p < .05$
¹CR=Can't Recall

Made Changes in Behaviour or Environment

Program Delivery	Made Changes in Behaviour or Environment		
	Yes	No	Total
Launch	50 %	50 %	24
Mail-out	37 %	63 %	19
Residents	35 %	65 %	20
Totals	40 %	60 %	63

Coalition Process

The coalition played a critical role in the development, testing, publication, launching and distribution of the booklet and program delivery. **Major strengths** of the coalition included a broad spectrum of representation from the community, commitment to a common goal, sharing the workload, and setting specific timelines for activities and events. **Challenges** identified included a lack of funding and time, finding direction and focus, and keeping the coalition process active after completion of the main task.

Results

- 96% of participants reported reading the booklet
- 67% of participants used the booklet to identify their major risk factors for falls
- 8% of participants used the planning sheet provided in the booklet
- 13% of participants utilized the list of organizations and contacts.
- 41% of participants made changes to their environment or behaviour.
- 61% of participants who identified their risk factors made changes in their environment.

The mail-out group was found to be more likely to use the booklet than the other two groups including identifying risks, using the planning sheet and contacting organizations (with only the use of the planning sheet and contacting organizations being significantly different between the groups).

Booklet Satisfaction

There were very high levels of satisfaction with the readability of the booklet, the wording and the layout. Only a small number identifying themselves as visually impaired stated they had trouble reading the print. Those that rated the individual sections of the booklet on their effectiveness in helping them learn more about preventing falls rated the sections very favorably. Overall, there was a high level of satisfaction with the First Step Program (3.7 on a 4.0 point scale).

Risk Factors

There were a wide range of risk factors identified by survey participants with the three most common being lack of **balance, weak muscles and foot problems**.

Top Risk Factors Identified by Seniors

Risk Factors	Percentage that Identified as a Top 3 Risk Factor
Have difficulty keeping my balance	44
Have weak muscles or stiff joints	35
Have Foot Problems	32
Walk in places that are uneven, slippery or icy	25
Neglect to regularly check for safety hazards in and around the home	22
Feel Dizzy	17
Take 3 or more medications	14
Have to rush to the bathroom	14
Have vision and/or hearing difficulties	13
Experience difficulty with sleeping	8
Have frequent slips, trips, near falls or falls	8
Experience shortness of breath	6
Other	6
Experience difficulty with concentrating	2
Drink alcohol frequently	2

The 3 most common actions taken to prevent falls were:

1. removal of rugs
2. being generally more careful (eg. move more slowly, rushing around less)
3. getting better shoes

Conclusions

Program delivery had a significant impact on whether or not participants used the planning sheet or contacted organizations, but no other program objective was significantly effected.

The impact of the booklet as a stand-alone tool is as significant as the booklet accompanied by an event.

If other communities plan to mainly distribute the booklet on its own, extensive coalition development is not needed with the booklet already prepared. Effective distribution strategies will, however, need to be in place.

Participants were generally very satisfied with the booklet format, layout and readability.