

## The National Falls and Bone Health Strategy

([http://www.hse.ie/eng/services/news/2008\\_Archive/Aug\\_2008/Preventing\\_Falls\\_and\\_Fractures.html](http://www.hse.ie/eng/services/news/2008_Archive/Aug_2008/Preventing_Falls_and_Fractures.html))

has been prioritised for implementation by the HSE and the State Claims Agency (SCA) in 2013. Anne Marie Ryan, HSE Office of the Assistant National Director for Older Persons and Irene O' Byrne-Maguire, Clinical Risk Adviser with the SCA, are joint co-ordinators for the project since mid February. A project plan to implement the National Strategy has been agreed, to include a Governance framework, an Integrated service delivery model approach to implementation and Key Deliverables.

The proposed implementation approach invites Expressions of Interest (EOI) from potential pilot sites /early adopters (at least one from each of the four HSE Administrative Areas) to implement a Falls and Bone Health integrated care pathway (ICP) for older persons aged 65 years and older in line with the National Strategy and the Specialist Geriatric Services Model (<http://www.hse.ie/eng/about/Who/clinical/natclinprog/olderpeopleprogramme/MocProg.html>).

Regional Implementation Teams (RIT) for each HSE Administrative Area will serve to enable the pilot sites/early adopters identified to implement such a model. Each RIT is being co-led by Older Persons and Primary Care Leads and will need to take account of new governance arrangements as they evolve. Regional Implementation Teams now wish to identify the educational, learning and development needs of health and social care professionals who are leading/co-ordinating an initiative(s) that contributes to an integrated care pathway (ICP) on falls prevention and bone health for older persons (65 years and older).

To help with this please complete this online survey as fully as possible. This should take 15-20 minutes pending your answers. Please note that this survey is ANONYMOUS and only aggregated data will be shared.

If you wish to PRINT your survey answers, please do so before pressing the button " Send Survey/Submit responses" as once SENT you will be unable to return to the survey. Please note that you will need to print each page separately before proceeding to the NEXT page.

If you need help at any stage, please contact Irene O' Byrne-Maguire at +353 1 6640984/mobile +353 87 6727705 or email: [iobyrnemaguire@ntma.ie](mailto:iobyrnemaguire@ntma.ie)

## CORE WORK PRACTICES in relation to falls prevention and bone health

There are 11 questions to be answered using a 5 point likert scale, eg., 5="Strongly agree ", 1="Strongly disagree "

The questions relate to risk factors, interventions, documentation and your role in ensuring service user needs are met.

### **\*1. I can Identify risk factors for falls and fracture in older persons**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

### **\*2. I can Identify core elements of a screening and multifactorial assessment tool**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

### **\*3. I can Describe when a falls and /or bone health risk assessment should be performed for Older Persons.**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

### **\*4. I Know the referral/discharge pathways needed to deliver multifactorial interventions**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

**\*5. I can Demonstrate understanding of the risk factors and interventions that have been shown to reduce falls in Older Persons**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

**\*6. I can Demonstrate understanding that interventions targeted at more than one risk factor reduce falls**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Disagree strongly

Please comemnt

**\*7. I can Demonstrate understanding of the assessment principles, risk factors, interventions and potential adverse effects RELEVANT TO MY ROLE in caring for Older Persons at risk of falls and factures, for example:**

- Individualised exercise programmes,**
- Medication reviews,**
- Home environment assessment and modification,**
- Postural hypotension management,**
- Vision assessment and referral,**
- Assessment Vitamin D deficiency/insufficiency and treatments,**
- Behavioural modifications and Education programmes**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

**\*8. I can Describe my role in ensuring individual service user needs are met, including interactions with other multidisciplinary team workers and the education of service users and family as appropriate**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

**\*9. I can Problem solve issues that may occur during care episodes along an integrated care pathway**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

**\*10. I can Demonstrate knowledge of required documentation, including reporting adverse events and audit requirements**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*11. I can Explain where to find relevant policies, procedures and guidelines/strategies**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

### LEADERSHIP and CHANGE MANAGEMENT

This section is adapted from Queensland's Government Guidelines for SC Infusion 2010, courtesy of Nursing and Midwifery Planning and Development Unit, HSE DML.

There are 12 questions to be answered using a 5 point likert scale, eg., 5="Strongly agree", 1="Strongly disagree"

## **\*12. I can Lead on clinical practice and service quality**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*13. I can Build and maintain relationship/team(s)**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*14. I can Initiate and innovate services**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*15. I can Negotiate, Communicate with, and Influence others**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*16. I can Proactively plan and organise activities**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*17. I can Effectively coordinate resources**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*18. I can Set and monitor performance standards**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*19. I can Demonstrate a working understanding of quality improvement (QI) concepts**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*20. I can Use quality improvement skills and tools**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## **\*21. I can Undertake a QI project using the Plan-Do-Study-Act cycle**

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## \*22. I can Problem solve challenges and resistances

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## \*23. I can Spread and sustain quality improvements

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree not disagree
- ☐ Disagree
- ☐ Strongly disagree

Please comment

## \*24. Please state your current job title and/or grade?

## \*25. Please tick the box best indication the number of years' experience you have in your current specialty/area of work

- ☐ Less than 5 years
- ☐ 5-10 years
- ☐ 10-15 years
- ☐ 15-20 years
- ☐ 25+ years

## 26. Is there additional information you require to be able to identify your exact training needs?



**27. In your opinion, what are the key training components that should be included in a training package to assist you with your falls prevention and bone health work?**



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Thank you for completing this survey.