California Against Falls:
Quarterly Webinar
July 22, 2016

https://global.gotomeeting.com/join/993091093
Dial: 1 (408) 650-3123
Access Code: 993-091-093

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Agenda
- County Report Out
- Integrating STEADI into EMS systems
- STEADI sustainability
- Fall Prevention Awareness Day – September 22nd

County Report Out
- Workshop Progress
- Best Practices
- Lessons Learned through Year 1

Integrating STEADI into EMS Systems
Anthony Ross
**STEADI** Stopping Elderly Accidents, Deaths & Injuries & **EMS**

- What is STEADI?
- Why is STEADI a good protocol for EMS?
- 3 case studies of integrating Falls Prevention into EMS protocols
- How to integrate STEADI into existing EMS protocols

**Why STEADI?**

- Uniform method for healthcare providers to share & access information
- Creates common language & measurements
- Easier to assess results & outcomes
- Laying the groundwork for Electronic Record integration & billing

**STEADI** Stopping Elderly Accidents, Deaths & Injuries & **EMS**

- 2 minute falls risk assessment developed with extensive input from medical professionals
  - Have you fallen in the past year?
  - Do you feel unsteady when you are standing or walking?
  - Are you worried about falling?
- CDC funded STEADI study in 3 statewide public healthcare systems (2016)
- CDC funded emergency department STEADI interventions (2015)

**Why EMS?**

For every 5,000 health care providers who adopt STEADI, over a 5-year period as many as:
- 6 million more patients could be screened,
- 1 million more falls could be prevented, and
- $3.5 billion more in direct medical costs could be saved.
Case Studies

• 2016 is the first year STEADI is being tested using EMS through nationwide grants
  – Good News: We are on the cutting edge
  – Bad News: there aren't any studies of STEADI being implemented by EMS

Case Studies

• Picked three organizations that use EMS to provide Falls Prevention for a minimum of 1 year
  – A small township in Pennsylvania that created their own EMS intervention
  – A countywide program in North Carolina
  – A study of the State of Vermont

North Huntingdon Township, PA

• 32 Square Miles Service area
• Part of Pittsburgh metropolitan area
• Serving over 30,000 people
• Population density 1,000 per square mile
• North Huntingdon EMS/Rescue is made up of a combination of volunteers & 21 staff members

North Huntingdon Township, PA

• In 2009, an EMT with 31 years experience researched patient charting software to determine 20% of call volume was falls-related
• Formed a committee with people who had pre-existing relationships with NH EMS
• Committee created an algorithm to identify patients at high risk for falls
North Huntingdon, PA

- Coalition Building: sought out new relationships with like-minded organizations
- Sought out 20-30 patients to create a preventative paramedicine system to address falls
- 6 months of testing to create a functioning system
- Took 2.5 years before first assessment was complete
- Today NH EMS does 5-6 assessments per month with an annual budget of $7,000 – some grants, but mostly fundraisers

Orange County, North Carolina

- 401 Square Miles
- Part of the Raleigh – Durham – Chapel Hill metropolitan area (Home of UNC Chapel Hill)
- Serving over 133,000
- Population density 296 per square mile
- All six paramedic squads of Orange County Emergency Services participate in Falls Prevention

Orange County, NC

- Passion Player was a UNC Hospital Occupational Therapist who’s interest was sparked while reviewing CDC guidelines for falls assessments
- Emergency Services did data analysis using patient reporting software
- Using CDC protocol and Department of Aging Master plan, a coalition was created with EMS, OC Department of Aging and UNC Hospital.

Orange County, NC

Three Coalition Goals:
1. System needs to be easily replicated
2. Create ways to measure performance
3. Create mechanisms for follow-up and tracking long-term outcomes
Orange County, NC

- Masters of Public Health student created a WebEOC intervention using the CDC guidelines
- 7-8 months before the first assessment was performed
- EMS Passion Players knocked on patient doors to find willing participants
- Took 2.5 years to complete the first 27 assessments

Orange County, NC

- Today, EMS does 10-12 assessments per month
- Within two years of implementation, 90% of patients who received an assessment did not call EMS again for a falls-related incident
- Implementation time per month
  - 100 hours to screen/conduct calls
  - 30 hours to do the falls assessments
  - 30 hours of administrative time

State of Vermont

- 9,616 Square miles
- 626,000 people (2nd least populated state)
- Population density is 68 people per sq. mile
- All 13 EMS districts are participating in a two-year grant to reduce falls by 10% funded by National Administration on Community Living

State of Vermont

Two-Year Grant Goals:

- Complete FallScape assessments with 1000 (unduplicated) adults age 50 & over
- Decrease number of repeat falls by 10%
- Secure a sustainable funding mechanism
State of Vermont

- Referrals
  - EMS squads conducted an assessment of current relationships to find other referral sources for patients
- Outreach and Engagement
  - Conducted Falls Prevention Workshop/presentation at older adult sites
  - Press releases to media included highlights from Falls Prevention month
  - Potential participants needed to hear about falls prevention through multiple channels before engaging

Best Practices

- Start slowly
- Passion Players are necessary to initiate change
- Building a coalition creates a think tank of multidisciplinary service providers focused on developing fall prevention strategies
- Support of the program is dependent on active participation and feedback from all involved

“Lessons Learned from Implementing CDC's STEADI Falls Prevention Algorithm in Primary Care” (2016)

- Practical application of STEADI in a large Internal Medicine Clinic
  - Developed a workflow that did not disrupt the clinic
  - Integrated the STEADI algorithm into EHR system Epic
  - Champions pilot tested the workflow and EHR tools using 56 patients over several months
  - 1 hour lunch trainings for providers/medical assistants
  - Screened 360 patients in the first three months

“Lessons Learned from Implementing CDC's STEADI Falls Prevention Algorithm in Primary Care” (2016)

KEYS TO SUCCESSFUL IMPLEMENTATION

- Development of electronic health record tools & workflow to guide clinical practice
- Proactive leadership of clinical champions within the practice to identify and respond to barriers
“Lessons Learned from Implementing CDC’s STEADI Falls Prevention Algorithm in Primary Care” (2016)

KOTTER FRAMEWORK
- Developed in 1995 as an 8-step process for organizational change used in various healthcare initiatives
- Focuses on the process of practice change and integration of a new protocol (like STEADI) into an existing structure

STEADI Sustainability
- Identify opportunities with existing partners/coalitions/workgroups
- Identify your champion(s)
- Create a collaborative vision
- Develop a SMART GOAL (Specific, Measurable, Achievable, Realistic, Time-Oriented)
- Identify your measures – how will you know that a change occurred?
- Monitor progress and adjust as needed

8 steps:
Kotter Framework for Change

STEADI Series
- Part 1: Integrating STEADI into EMS Systems
- Part 2: Q&A with EMS Systems (August)
- Part 3: Take Action! Fall Prevention Awareness Day (September)
Fall Prevention Awareness Day

- September 22nd
  - NCOA Photo Contest
  - County-specific fall prevention awareness activity

[https://www.ncoa.org/healthy-aging/falls-prevention/falls-prevention-awareness-day/]