



The Prevention and Management of Falls and Fragility Fractures in Older People

Learning outcomes, knowledge specification, evaluation and guidance for a training programme

Aim of the training

This training will prepare candidates (health and social care workers in all sectors) to contribute to the prevention and management of falls, and prevention of fragility fractures in their day to day work with older people and their carers.

This does not include training to prepare candidates to respond to an older person who has just fallen and who requires immediate assistance. Please refer to local Manual Handling, Health and Safety and First Aid protocols for this.

Background

This training programme focuses on falls and fracture prevention and management in older people. With the population of older people set to rise, the prevalence of falls and fractures is expected to increase. It is widely recognised that many falls and fractures in this target population can be prevented by timely, targeted, individualised interventions.

The training programme focuses on older people because of the large number of falls experienced by people aged over 65, and the potential seriousness of the consequences of falls in this population, specifically:

- ◆ decline in quality of life
- ◆ serious injury
- ◆ growing dependence on health and social care services
- ◆ (in some cases) death

The evidence base supporting the training is related, almost exclusively, to falls prevention and management in older people. However, younger people fall too, and osteoporosis also affects those under 65 years. In addition, the most recent clinical guidelines conclude that the evidence for or against falls prevention interventions in older people with known dementia is insufficient and inconclusive. Although older people with cognitive impairment are at an increased risk of falling, this group has been excluded from most of the randomised controlled trials that have demonstrated positive outcomes following interventions.

Some of the learning in this programme may be applicable to preventing falls in both these populations. It is also acknowledged that fall and fracture risks in old age can be influenced earlier in life by lifestyle and other factors, such as the presence of long-term conditions.

Learning outcome	Knowledge specifications	Practice	Method of gathering evidence to demonstrate knowledge and application to practice	Mapping to SVQ, KSF and Continuous Learning Framework																																								
<p>1 In order to support self-management, be able to advise and inform the older person and carers about falls and fragility fractures.</p>	<p>a) Legal, ethical, equality, best practice guidelines and local protocol context.</p> <p>b) Definition of a fall. Definition of osteoporosis. Knowledge of the link between falls, osteoporosis and fragility fractures.</p> <p>c) Understand the scale of the problem in terms of the rising population of older people and the number of older people who fall and fracture. Recognise that falls are often perceived incorrectly as an inevitable consequence of ageing and that many, but not all falls are preventable.</p> <p>d) Understand the physical and psychological consequences of falls and fractures and the impact on the life of the older person and their family/carers.</p> <p>e) Awareness of the consequences of falls and fractures in terms of the financial cost to local and national NHS/social services.</p> <p>f) Understand the positive impact targeted, timely and evidence-based interventions can make on:</p>	<p>Using communication appropriate to the individual's understanding apply this knowledge appropriately to advise and inform others of:</p> <ul style="list-style-type: none"> ◆ the importance of falls and fracture prevention and management ◆ the benefits of interventions, such as improved health and well-being ◆ the importance of reporting falls ◆ the benefits of ongoing participation in falls prevention and management activities 	<p>Product, for example:</p> <ul style="list-style-type: none"> ◆ Reflective accounts and/or professional discussion ◆ Direct observation or witness testimony ◆ Reference to person's notes, records, personal plans, etc ◆ Role play ◆ Case study 	<table border="0"> <tr> <td>SVQ2</td> <td>SVQ3</td> </tr> <tr> <td>HSC21</td> <td>HSC21</td> </tr> <tr> <td>HSC22</td> <td>HSC22</td> </tr> <tr> <td>HSC23</td> <td>HSC23</td> </tr> <tr> <td>HSC24</td> <td>HSC24</td> </tr> <tr> <td>HSC25</td> <td>HSC25</td> </tr> <tr> <td>HSC27</td> <td>HSC27</td> </tr> <tr> <td>HSC211</td> <td>HSC211</td> </tr> <tr> <td>HSC222</td> <td>HSC215</td> </tr> <tr> <td>HSC215</td> <td>HSC225</td> </tr> <tr> <td>HSC222</td> <td>HSC226</td> </tr> <tr> <td>HSC226</td> <td>HSC31</td> </tr> <tr> <td></td> <td>HSC32</td> </tr> <tr> <td></td> <td>HSC35</td> </tr> <tr> <td></td> <td>HSC344</td> </tr> <tr> <td></td> <td>HSC3119</td> </tr> <tr> <td></td> <td>CU6</td> </tr> <tr> <td></td> <td>GEN13</td> </tr> <tr> <td></td> <td>GEN14</td> </tr> <tr> <td></td> <td>GEN20</td> </tr> </table>	SVQ2	SVQ3	HSC21	HSC21	HSC22	HSC22	HSC23	HSC23	HSC24	HSC24	HSC25	HSC25	HSC27	HSC27	HSC211	HSC211	HSC222	HSC215	HSC215	HSC225	HSC222	HSC226	HSC226	HSC31		HSC32		HSC35		HSC344		HSC3119		CU6		GEN13		GEN14		GEN20
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	<ul style="list-style-type: none"> ◆ the prevention of falls ◆ the prevention of fractures ◆ the older person's quality of life <p>g) Understand your role and responsibilities in working with others to promote falls and fragility fracture prevention and management.</p>			<p>CLF All of the personal capabilities</p> <p>KSF All core — levels 1,2 HWB1 — levels 1,2 HWB2 — levels 1,2 HWB4 — levels 1,2</p>
2 Identify, record and report risks and physical and psychological consequences of falls and fragility fractures for older people and their family/carers.	<p>a) Understand the importance of recognising and reporting older people at risk of having a fall.</p> <p>b) Recognise physical and psychological consequences of falls.</p> <p>c) Knowledge of causes of falls and the most common risk factors.</p> <p>d) Recognise modifiable and non-modifiable risk factors.</p> <p>e) Knowledge of the most common risk factors and signs of osteoporosis and the common medications used in the treatment of osteoporosis.</p> <p>f) Knowledge of the three levels of falls and fracture risk assessment:</p> <ul style="list-style-type: none"> ◆ basic ◆ multifactorial screen ◆ specialist <p>g) In the context of your own work role</p>	In line with local organisational requirements identify, report and record in the individual's record the presence of risk factors and/or the physical and psychological consequences of falls.	<p>Product, for example:</p> <ul style="list-style-type: none"> ◆ Report ◆ Risk assessment ◆ Reference to person's notes, records, personal plan, etc ◆ Direct observation or witness testimony ◆ Case study ◆ Written questions/ answers 	<p>SVQ2 SVQ3</p> <p>HSC21 HSC21</p> <p>HSC22 HSC25</p> <p>HSC23</p> <p>HSC24</p> <p>HSC25</p> <p>HSC27</p> <p>HSC211 HSC211</p> <p>HSC222 HSC215</p> <p>HSC215</p> <p>HSC222</p> <p>HSC226</p> <p>HSC32</p> <p>HSC35</p> <p>HSC344</p> <p>CU6</p> <p>GEN14</p> <p>GEN20</p>

	<p>understand which level of assessment you are expected to carry out and the range of actions you may take thereafter.</p> <p>h) Understand the importance of recording, reporting and reviewing information on falls and falls/fracture risk:</p> <ul style="list-style-type: none"> ◆ to support sharing of information to benefit the individual ◆ for statistical monitoring for service evaluation and improvement 		<p>CLF Focus on people Work in partnership Lifelong Learning Flexibility Confidence Resilience Accurate self assessment</p> <p>KSF All core — levels 1,2 HWB1 — levels 1,2 HWB2 — levels 1,2 HWB4</p>
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<p>3 Understand the range of solutions available to help reduce risks, including steps to be taken to enable self management, and apply within your scope of practice.</p>	<p>a) Knowledge of the actions an older person can take to minimise falls and fracture risk and why they are important.</p> <p>b) Knowledge of the range of effective interventions to reduce an individual's risk of falling and sustaining a fracture.†</p> <p>c) In the context of your own work, have knowledge of professionals/services/teams available involved in the prevention and management of falls and fragility fractures.</p> <p>d) In the context of your own work role understand protocols, referral criteria and routes for further interventions.</p>	<p>Using language appropriate to the individual's understanding convey to the older person and/or carer the basic actions that can be taken routinely to reduce the risk of falling, osteoporosis and/or sustaining a fracture</p> <p>In line with local organisational requirements record findings accurately and inform and discuss actions taken with senior staff/colleagues in accordance with local protocols.</p> <p>Demonstrate the ability to use appropriate referral for further intervention to manage and prevent falls and fractures.</p> <p>Demonstrate an understanding of your own scope of responsibility with regards to interventions.</p> <p>Support/assist the older person and their carer in reducing risk with the consent of the older person and carer to enable self-management.</p>	<p>Product, for example:</p> <ul style="list-style-type: none"> ◆ person's notes, records, personal plans etc, or reports ◆ Observation or witness testimony ◆ Role play ◆ Case study ◆ Written questions/ answers 	<table border="0"> <tr> <td>SVQ2</td> <td>SVQ3</td> </tr> <tr> <td>HSC21</td> <td></td> </tr> <tr> <td>HSC22</td> <td>HSC25</td> </tr> <tr> <td>HSC23</td> <td>HSC27</td> </tr> <tr> <td>HSC24</td> <td></td> </tr> <tr> <td>HSC25</td> <td></td> </tr> <tr> <td>HSC27</td> <td></td> </tr> <tr> <td>HSC211</td> <td>HSC211</td> </tr> <tr> <td>HSC222</td> <td>HSC215</td> </tr> <tr> <td>HSC215</td> <td>HSC31</td> </tr> <tr> <td>HSC222</td> <td>HSC33</td> </tr> <tr> <td>HSC226</td> <td>HSC344</td> </tr> </table> <p>CLF</p> <p>Focus on people Work in partnership Motivating and leading others Lifelong learning Flexibility Confidence Accurate self assessment</p> <p>KSF</p> <p>All core — levels 1, 2 HWB1 — levels 1, 2 HWB2 — levels 1, 2 HWB4 — levels 1, 2</p>	SVQ2	SVQ3	HSC21		HSC22	HSC25	HSC23	HSC27	HSC24		HSC25		HSC27		HSC211	HSC211	HSC222	HSC215	HSC215	HSC31	HSC222	HSC33	HSC226	HSC344
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