


Volume 13, 18 December 2013

Publisher: Igitur publishing

URL: <http://www.ijic.org>

Cite this as: Int J Integr Care 2013; WCIC Conf Suppl; [URN:NBN:NL:UI:10-1-115968](https://nbn-resolving.org/urn:nbn:nl:ui:10-1-115968)

Copyright: 

Poster Abstract

Engaging the community - a community-based falls prevention program for the elderly

J. Molina, Health Services & Outcomes Research, National Healthcare Group, Singapore, Singapore

N. Hafizah, Continuing and Community Care, Tan Tock Seng Hospital, Singapore, Singapore

B. Heng, Health Services & Outcomes Research, National Healthcare Group, Singapore, Singapore

Correspondence to: **Joseph Molina**, Doctor, National Healthcare Group, SIN, E-mail: Joseph.Antonio.Molina@nhg.com.sg

Abstract

Objective: The Community Health Engagement Program (CHEP) aimed to reduce falls incidence among community-dwelling individuals 57+ years old in Singapore.

Methods: Participants were screened for fall risk factors, grouped by fall risk and referred to specialists when needed. Occupational, physiotherapists and nurses provided exercise training, health education and home safety assessment in the first three months. Thereafter, community volunteers took over the supervision of exercises until the twelfth month. Monthly falls incidence, physical performance, health-related quality of life, falls efficacy and mobility were assessed at baseline, 12, 24 and 52 weeks.

Results: The median age of 745 participants was 73 years; 28% were male. Berg Balance, Six Minute Walk, Chair Rise, Step Test results and qualitative assessments were significantly better at 12, 24 and 52 weeks than baseline. Time-up-and-go was better until week 24. Home safety improved post-intervention (95% CI of change in Safer score=2.01-2.43). Falls incidence was higher before participation (OR=2.43, 95% CI=1.39-4.24). Though not significantly different in the first two quarters, there were fewer falls per person on the 3rd and 4th quarter than baseline (95% CI of the difference = 0.013-0.164 and 0.041-0.172, respectively).

Conclusion: Residents may be empowered to take responsibility for preventing falls in their own community.

Keywords:

falls, community, geriatric, exercises
