



# Translating Audit Into Action: Operationalising The World Falls Prevention And Management Guidelines In A Post-Acute Rehabilitation Setting

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## Aim

The aim of this study was to operationalise the World Guidelines on the Prevention and Management of Falls in Older Adults (2022) to improve physiotherapy assessment and management of falls in a post-acute rehabilitation setting in Ireland.

## Introduction

Falls are the leading cause of major trauma in older adults in Ireland (Major Trauma Audit National Report, 2022).

Falls represent the most frequently reported patient safety incident in post-acute rehabilitation (Health Service Executive, 2022).

Despite the availability of international guidance on falls prevention and management, translation into routine clinical practice remains challenging.

## Methodology

A four-phase quality improvement initiative was undertaken using the HSE Quality Improvement Toolkit.

Figure 1. Four Phase Falls Prevention Quality Improvement Process

### Phase 1 - Plan

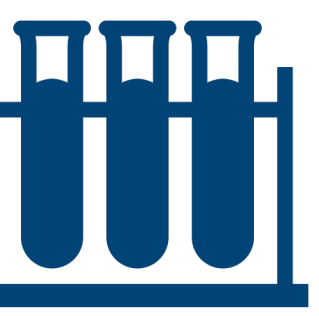
#### Understanding Current Practice



Mapped existing practice against guideline recommendations  
Identified gaps in:  
Vestibular screening/ Consistency of multifactorial falls risk assessment (MFRA)/ Safety awareness assessment/ Physiotherapy action planning  
Process-mapped the falls pathway  
Co-designed assessment templates  
Assessed staff readiness for change

### Phase 2 - Do

#### Testing and Refining



Iterative improvement cycles to refine assessment processes  
Piloted vestibular screening  
Co-designed patient and visitor education materials  
Commenced measurement for improvement

Integrated falls prevention and vestibular screening into:  
Staff induction  
Continuing professional development  
Shared learning structures

Audited MFRA and vestibular screening completion.  
Monitored functional outcomes.  
Collected quantitative and qualitative staff feedback.

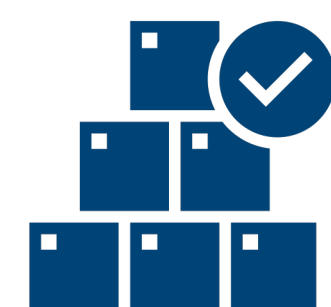
### Phase 3 - Study

#### Measuring Impact



### Phase 4 - Act

#### Embedding and Sustaining



## Results

Clinical documentation review identified a high burden of intrinsic falls risk. Gaps were identified in safety awareness assessment, vestibular symptom screening, and physiotherapy action planning.

Following implementation, assessment completeness improved, vestibular screening was embedded into standard practice, and functional outcome monitoring supported identification of modifiable risk factors. Staff readiness for change demonstrated high acceptability and capacity to sustain improvements.

Figure 2. Vestibular Symptom Screening

**Physiotherapy Vestibular Symptom Screening**

The vestibular symptom algorithm for inpatients, guides physiotherapists in the identification of older adults experiencing dizziness

- Ask**  
Take a history that includes:  
If a patient is experiencing dizziness in either themselves or the environment  
*\*Guidance: Try to distinguish between symptoms of dizziness and lightheadedness.*
- Screen**  
Complete the Vestibular Symptom Screening Tool on admission to detect presence and severity of dizziness symptoms  
*\*Guidance: A score of 4 or more should be referred for a vestibular assessment.*
- Intervene**  
Complete the Vestibular referral form including the CTSIB-M for a specialised vestibular assessment.  
Individualised treatment will be provided where indicated on vestibular assessment.

Falls Rehabilitation | Identification of older adults living with dizziness, improves falls management and outcomes

Figure 3. Falls Prevention Toolkit

**Physiotherapy Falls Prevention and Management Toolkit**

**Risk Factor: Impaired Balance**

**Standardised Balance Assessment Battery**

Domain	Recommended Tools	Purpose
Static Standing Balance	<ul style="list-style-type: none"> <li>Romberg</li> <li>Semi-tandem</li> <li>Tandem</li> <li>Four-Stage balance test</li> <li>BBS (some domains)</li> </ul>	Postural stability under reduce base of support
Dynamic Standing Balance	<ul style="list-style-type: none"> <li>TUAG</li> <li>BBS (some domains)</li> <li>minIBEST</li> <li>Functional Gait Assessment</li> </ul>	Determine functional mobility & fall risk
Reactive Balance	<ul style="list-style-type: none"> <li>Push and Release Test</li> <li>minIBEST (specific domains)</li> </ul>	Protective stepping
Strength	<ul style="list-style-type: none"> <li>5x Sit-to-Stand</li> <li>1 minute Sit-to-Stand</li> <li>MMT</li> </ul>	Lower limb strength and endurance
Vestibular	<ul style="list-style-type: none"> <li>VSET</li> <li>mCTSIB</li> </ul>	Determine presence of vestibular symptoms
Orthostatic	<ul style="list-style-type: none"> <li>Lying-Standing BP protocol</li> </ul>	Determine presence of cardiovascular symptoms

Falls Rehabilitation | Identification of older adults at risk of falls, improves falls management and outcomes

## Discussion

The integration of vestibular screening into routine multifactorial falls risk assessment represents a critical advancement in identifying modifiable risk factors, potentially reducing fall incidence in post-acute rehabilitation settings (Figure 2).

Staff engagement and co-designed tools are essential for sustaining quality improvement initiatives, highlighting the importance of multidisciplinary collaboration and continuous professional development in embedding best practice (Figure 3).

## Conclusion

Structured quality improvement effectively translated audit findings into guideline-aligned clinical action. Embedding vestibular screening and strengthening MFRA processes supported a culture of continuous improvement in falls prevention.

## References

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