Logan-Beaudesert Continuum of Care Project case study

This section discusses a project run by Queensland Health’s Logan-Beaudesert Health Service District (LBHSD) and Brisbane Southside Population Health Unit to prevent falls across the continuum of care.

About the Logan-Beaudesert Health Service District and population

Logan-Beaudesert Health Service (LBHSD) is situated midway between Brisbane and the Gold Coast and includes some southern Brisbane suburbs, Logan City Council, the Gold Coast hinterland, and Beaudesert Shire down to the New South Wales border.

LBHSD has hospitals at Meadowbrook (Logan City) and Beaudesert, community health centres at Logan Central, Beenleigh and Jimboomba, and adult dental clinics at Beenleigh, Logan Central, Beaudesert Hospital and Logan Hospital.

Programs available through the community health centres include home and community care, adult, youth and child mental health programs and adult allied health services such as occupational therapy, physiotherapy and social work.

Compared to Queensland, LBHSD has a:

- moderately high growth rate
- projected increase in the proportion of older people
- higher proportion of people living in areas of greater socioeconomic disadvantage
- culturally diverse population.
Getting started

**Logan Hospital Falls Collaborative**

- Logan Hospital previously had working parties established for implementation of Queensland Health’s *Falls prevention: Best practice guidelines for public hospitals and state government residential aged care facilities incorporating community integration supplement*. Several best practice strategies existed throughout the hospital as a result of these working parties.
- With the introduction of Australian Council for Safety and Quality in Healthcare (ACSQHC) *Preventing Falls and Harm from Falls in Older People (2005)*, the hospital initiated an ongoing collaborative of clinicians to ensure the hospital met national standards.
- In December 2006, the Logan Hospital Falls Collaborative commenced. Objectives were to:
  - manage the interface between the statewide Falls Prevention Collaborative, the Patient Safety Centre and clinical practice to enhance District outcomes
  - support the District representative attending statewide collaborative meetings
  - review the current District falls prevention program

**Logan Community Falls Collaborative**

- Brisbane Southside Population Health Unit and the LBHSD initiated a collaborative falls prevention network in 2005/06, to support government and non-government agencies operating in the area. The network aimed to establish a more coordinated and measurable approach to falls prevention in older people.
- Local needs were identified through a needs assessment and gap analysis at a falls prevention forum early in 2006. The needs identified included the:
  - provision of falls prevention programs using a culturally relevant approach
  - sharing of information regarding falls prevention programs and data collection between community service providers
  - further development of collaboration and partnership between community-based services.
- A Logan Community Falls Collaborative was formed to engage partners (refer to diagram on page 4).
Getting started (continued)

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<tr>
<th>Logan Hospital Falls Collaborative</th>
<th>Logan Community Falls Collaborative</th>
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<tr>
<td>– ensure relevant and timely information and education is made available to District staff</td>
<td>⬤ see diagram on page 4</td>
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<td>– achieve best practice in implementing falls prevention interventions</td>
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<td>– analyse trends in falls data and support interventions for identified needs</td>
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<td>– ensure the District achieves a reduction in falls and fall related injuries</td>
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<td>– evaluate and monitor implementation of guidelines and ‘lessons learnt’ from clinical incident analysis</td>
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<td>– provide recommendations that minimise falls occurrences to relevant clinical groups and quality unit/council.</td>
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<td>› To facilitate the development of District goals in falls prevention, the District held a falls planning day in April 2007. Facilitated by Rebecca Bell (Principal Project Officer, Patient Safety Centre), the day was attended by a wide range of stakeholders including nursing, medical, allied health and community representatives. Key strategies/initiatives were established for the hospital to progress in falls prevention.</td>
<td>› see diagram below</td>
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<td>› A key strategy was the development of a cross-continuum approach to falls across the District including liaison with the community collaborative.</td>
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![Diagram of collaborative partners]

- Burringilly
- Logan-Beaudesert HSD Hospitals
- Pharmacy
- Brisbane South Population Health Unit
- Logan City Council
- Council on the Ageing
- Gold Coast Population Health Unit
- Griffith University
- General Practice
- Logan Area Network
- Spiritus
- Multilink
- Department of Housing
- Fitness Queensland
## Taking action

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<td>Key strategies at Logan Hospital have included:</td>
<td>A submission was successfully made for $70,000 funding through Queensland Health’s ‘Strengthening Aged Care’ initiative. The following four key objectives were implemented:</td>
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<td>› developing a falls awareness package for staff</td>
<td>› a falls prevention and physical activity program was developed in collaboration with the Aboriginal and Torres Strait Islander communities and implemented at the Burringilly Respite Centre, in a culturally relevant and respectful way through appropriate resources and traditional art and games</td>
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<td>› developing orange alert stickers for patient notes which flag a patient with a high falls risk for multi-disciplinary team members</td>
<td>› a falls prevention and physical activity program was developed and implemented with Multilink Community Services to address the needs of communities from culturally and linguistically diverse backgrounds. This program used visual mediums such as interactive role play, traditional music and dance.</td>
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<td>› conducting quarterly falls education days to increase staff knowledge about the ‘Green Box’ and other falls prevention strategies</td>
<td>› investigating the inclusion of falls prevention awareness in orientation programs</td>
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<td>› including a nutrition screening section in the risk assessment tool used as part of end-of-bed documentation</td>
<td>› developing and reviewing policies and procedures eg. falls management/risk tool/restraint policy/lo-lo bed utilisation criteria</td>
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<td>› identifying processes that ensure at-risk patients are supported through interface management with the community on discharge</td>
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<td>› introducing a proactive activity program for patients as in the <em>patient rounding</em> strategy from <em>Transforming Care at the Bedside</em> program</td>
<td>› opportunities were provided for older people to identify and experience a variety of physical activities that increase strength and balance at ‘Getting Out and About Locally’ (GOAL) come and try days. The GOAL days were run without the negative association of falls prevention, and aimed to increase participation in physical activity in the longer term.</td>
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<td>› reviewing Queensland Health Electronic Reporting Service (QHERS) report data to identify clinical areas that may require support.</td>
<td>› a comprehensive referral pathway for falls prevention and management was developed that operates across the continuum of care, and a directory was produced to help direct professionals and clients to appropriate services.</td>
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Sustaining the continuum of care approach

A member from each of the Falls Collaboratives participates in the Queensland Falls Injury Prevention Collaborative working group to enhance communication and keep abreast of best practice.

A community representative had been included on the Logan Hospital Falls Collaborative and a hospital representative has been included on the Logan Community Falls Collaborative to facilitate communication and joint activities.

Falls prevention has been added as standing agenda item at all clinical meetings within the hospital.

Resource champions are to be identified within the hospital's clinical units.
Professional training, a directory of falls prevention, physical activity programs and the information clients and their carers received at the GOAL physical activity come and try days will help to increase the number of clients accessing services along the falls continuum.

Falls prevention is prioritised as part of the ongoing work of the Brisbane Southside and Gold Coast Population Health Units and will continue to be built upon.

In the future, it is hoped that a cross-continuum working party will be developed with representatives from both collaboratives and external agencies.

**Challenges**

Challenges have included:

- engaging and coordinating a large array of community and hospital stakeholders
- embedding falls prevention within the day-to-day activities of organisations in the wider community
- a lack of a skilled and dedicated falls prevention workforce in any of the participating organisations to provide leadership and a driving force for change
- a re-structure of Queensland Health to bigger districts may make it difficult to get support for local strategies from District Executive Members.

**Contacts**

- A/ Nursing Director of Medicine
  Chair of Falls Collaborative
  Logan Hospital
- Patient Safety Officer
  Logan Hospital
- Senior Health Promotion Officer
  Brisbane South Population Health Unit

Queensland Health Logan-Beaudesert Health Service District (LBHSD) and Brisbane Southside Population Health Unit. 2007. *Queensland Stay On Your Feet® Community Good Practice Toolkit – Health Continuum: Logan-Beaudesert Continuum of Care Project case study*. Health Promotion Unit, Division of the Chief Health Officer, Queensland Health.