

# WHO table of roles and responsibilities of those working with people who have had a fall

This table was developed by the World Health Organisation in 2007 [76], and is based on Appendix 4 of Cryer C. 2001. Accidental Injury Task Force Working Group on Older People. London United Kingdom. Accessed 10/12/2007 http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\_4072216

# Geriatricians (rheumatologists, orthopaedic surgeons, emergency department doctors)

- > individualise programs in rehabilitation and outpatient packages
- > review ward (hospital) environment
- identify reversible contributory factors and suggest evidence-based interventions
- **>** investigate risk of osteoporosis and treat as necessary
- **>** consider encouraging patients to use hip protectors

## **Emergency department medical staff**

- > assess main risk factors and implement appropriate referral and advice
- arrange follow up of older patients seen because of a fall and refer to a specialised outpatient hospital-based falls service, if available

#### Health authorities

- implement a falls risk assessment for all older patients being admitted to hospital
- **>** devise a protocol for reviewing reversible risk factors for high-risk individuals
- **)** initiate prompt questions in any data collection practices
- > establish a specialised outpatient hospital-based falls service
- > support the role of the physiotherapy services rehabilitation of fallers
- > consider falls and fracture prevention as a joint strategy



#### Primary health care teams

- > include individualised risk assessment in care package for frail older people
- > encourage patients to be physically active
- > review medications and physical activity of at risk residents of care facilities
- **)** investigate the risk of osteoporosis and treat as necessary

# Voluntary organisations (NGOs) providing services for older people

- > include Tai Chi in the activities offered
- > promote leisure activities involving movement

### Managers and staff of residential care facilities for older people

- > organise exercise sessions or physical activity options for residents
- > review the home environment for safety
- > assess residents after a fall for reversible risk factors
- > encourage residents to use hip protectors

# Sports and physical activity departments/centres

- ➤ make Tai Chi sessions and other appropriate activities available in community settings
- > train specialised exercise instructors in effective fall prevention exercise
- > promote leisure activities involving movement

#### Federal government

- > prioritise falls prevention in national targets for injury prevention
- > prioritise falls and fracture prevention in health provision for older people
- prioritise health promotion information and policy on physical activity among older people
- **>** advocate the inclusion of injury prevention issues in pre-retirement courses
- > support nationally recognised training in delivery of appropriate forms of physical activity.

**Citation:** Queensland Health. 2007. *Queensland Stay On Your Feet® Community Good Practice Toolkit – Phase 2 materials: Roles and responsibilities of those working with people who have had a fall (based on WHO 2007 and Cryer 2001)*. Health Promotion Unit, Population Health Branch, Division of the Chief Health Officer, Queensland Health, Brisbane.