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Elderly Falls



Theory

### Translation of falls prevention knowledge into action in hospitals: What should be translated and how should it be done?

Terry P. Haines<sup>a, b, \*</sup>, , Nicholas G. Waldron<sup>c, d, \*</sup> 

<sup>a</sup> Allied Health Research Unit, Southern Health, Kingston Centre, Kingston Rd, Cheltenham, Victoria, Australia, 3192  
<sup>b</sup> Southern Physiotherapy Clinical School, Monash University  
<sup>c</sup> Health Networks branch, Department of Health, Government of Western Australia, 189 Royal Street, Perth, Western Australia, 6849  
<sup>d</sup> Department of Geriatric Medicine, Armadale Kelmscott Memorial Hospital, Perth, Australia

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#### Abstract

**Introduction**  
 Falls prevention evidence has changed and evolved over time with positive and negative studies revealing that a "one-size fits all" approach is not the solution. Care must be taken to critically appraise the evidence and the potential applicability of that evidence to the specific hospital setting.

**Method**  
 A narrative account of the evolution of research evidence in this field is first presented. How this evidence should be applied in clinical practice is challenging, with a lack of translational evidence for the hospital setting we draw on broader theory of translating knowledge to action.

**Conclusions**  
 The journey should begin with formation of a management and engagement committee. A review of existing practices and the difference between existing practice and evidence-based practice should be undertaken to identify the "evidence-practice gap." Engagement with staff is recommended to inform a plan for practice change. Plans for resourcing, targeting, and evaluating these strategies should also be undertaken.

**Impact on Industry**  
 This paper will assist hospitals to identify and implement evidence based falls prevention strategies leading to an improvement in patient safety.

**Keywords**  
 Falls; Hospital; Injury; Prevention

#### Figures and tables from this article:

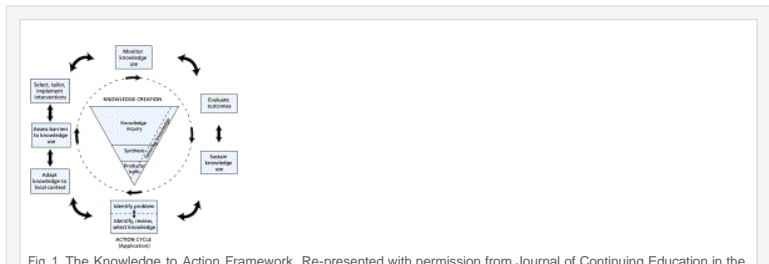


Figure options

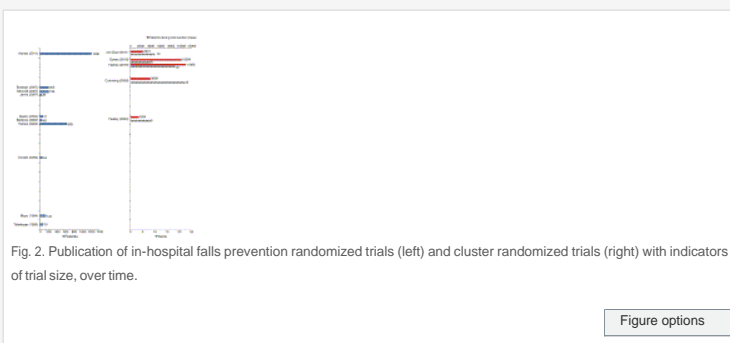


Fig. 2. Publication of in-hospital falls prevention randomized trials (left) and cluster randomized trials (right) with indicators of trial size, over time.

Figure options

Table 1. Summary of interventions used in randomized and cluster randomized trials combined with study investigator interpretations of positive effect (+ve), null effect (---) or negative effect (-ve).



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Table 2. Checklist for management and engagement committees when seeking to implement evidence-based falls prevention strategies.



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Corresponding author at: Allied Health Research Unit, Southern Health, Kingston Centre, Cheltenham, Victoria, Australia, 3192.

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**Terry P. Haines** has training in physiotherapy and health economics and completed his PhD titled "Prevention of falls in the subacute hospital setting" in 2005. He has led some of the world's largest falls prevention trials in the hospital setting. His current academic role is the Director of the Allied Health Research Unit (Southern Health) and Director of Research for the Southern Physiotherapy Clinical School (Monash University). He is supported by an Australian National Health and Medical Research Council Career Development Award (2010–2013).

**Nicholas G. Waldron** attained his medical degree from the University of Otago (NZ), moving to Australia to complete his specialist training. He currently works as a Geriatrician at Armadale Hospital and is a senior lecturer with University of Notre Dame (Perth, WA). From 2008–2010 he was the NHMRC National Institute of Clinical Studies – WA Health Fellow, following his research interests in knowledge translation. NW leads the Falls Prevention Health Network of Western Australia and is responsible for implementing the state-wide model of care. In addition to falls prevention research interests include networking and health services research.