

Poster – #EIE2021

The implementation of multi-component fall prevention interventions in the community: a scoping review on barriers and facilitators.

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Research aim

Multicomponent fall prevention interventions (FPIs) are effective in reducing fall rates among community-dwelling older adults. However, implementation of FPIs often fails due to the complex context of the community involving multiple stakeholders within and across multiple settings, sectors and organizations. There is a need for better understanding occurring context-related challenges to implementation of health care innovations. Therefore, the aim of the current study was to identify what contextual factors influence the implementation of FPIs in the community.

Methods

This study is part of a four-year Dutch implementation-research project: FRIEND (Fall pRevention ImplemEntatioN stuDy). A scoping review was performed using the Arksey and O'Malley framework, including a qualitative validation in clinical practice. First, a review of scientific publications and grey literature were systematically searched for determinants of implementation of community-based FPI. The Practical, Robust Implementation and Sustainability Model (PRISM) framework was used to categorize the identified factors. Subsequently, four focus groups with healthcare professionals and social work professionals (n=34) were held to ensure a deeper understanding of the identified determinants.

Key findings

Fourteen relevant publications were included, of which four specifically addressed FPI. 'Communication and collaboration' was mentioned in twelve of the fourteen publications as an important factor that could act as both barrier or facilitator to successful implementation. This factor was mentioned as well in each focus group as an essential issue. Consequently, collaborative community relationships is a significant contributor to implementation success of FPIs in community care settings. These interprofessional relationships may improve the assurance and continuity of the implementation process and promote adequate teamwork. Furthermore, adequate leadership and coordination across departments and specialists are considered important enhancing factors to successful implementation. Leadership – or lack thereof – was described in eight publications and also emerged from each focus group.

Discussion

What are your suggestions to improve interprofessional collaboration in community care? In what way could we measure the processes and important players of implementation of an evidence-based intervention?