falls in older people risk factors and strategies for prevention

#elderly fall prevention #risk factors for falls in seniors #preventing falls older adults #senior home safety #balance exercises for elderly

Falls are a significant concern for older adults, often leading to serious injuries and decreased independence. Understanding the primary risk factors, such as environmental hazards, medication side effects, and muscle weakness, is crucial for developing effective prevention strategies. This resource explores common causes of falls in seniors and provides actionable insights, including home modifications, exercise programs, and regular health assessments, to help reduce the incidence of falls and promote a safer, healthier lifestyle for older individuals.

Falls in Older People

Covering epidemiology, evidence-based risk assessment and falls-prevention strategies, this book will be invaluable to all involved with health care of the elderly.

Falls in Older People

A concise, up-to-date guide to the understanding, prevention and treatment of falls in older adults, covering recent advances in research.

Falls in Older People

Since the first edition of this very successful book was written to synthesise and review the enormous body of work covering falls in older people, there has been an even greater wealth of informative and promising studies designed to increase our understanding of risk factors and prevention strategies. This second edition, first published in 2007, is written in three parts: epidemiology, strategies for prevention, and future research directions. New material includes recent studies covering: balance studies using tripping, slipping and stepping paradigms; sensitivity and depth perception visual risk factors; neurophysiological research on automatic or reflex balance activities; and the roles of syncope, vitamin D, cataract surgery, health and safety education, and exercise programs. This edition will be an invaluable update for clinicians, physiotherapists, occupational therapists, nurses, researchers, and all those working in community, hospital and residential or rehabilitation aged care settings.

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Falls in Older People

The WHO Falls Prevention for Active Ageing model provides an action plan for making progress in reducing the prevalence of falls in the older adult population. By building on the three pillars of falls prevention, the model proposes specific strategies for: 1. Building awareness of the importance of falls prevention and treatment; 2. Improving the assessment of individual, environmental, and societal factors that increase the likelihood of falls; and 3. For facilitating the design and implementation of culturally appropriate, evidence-based interventions that will significantly reduce the number of falls among older persons. The model provides strategies and solutions that will require the engagement of multiple sectors of society. It is dependent on and consistent with the vision articulated in the WHO Active Ageing Policy Framework. Although not all of the awareness, assessment, and intervention strategies identified in the model apply equally well in all regions of the world, there are significant evidence-based strategies that can be effectively implemented in all regions and cultures. The degree to which progress will be made depends on to the success in integrating falls prevention strategies into the overall health and social care agendas globally. In order to do this effectively, it is necessary to identify and implement culturally appropriate, evidence-based policies and procedures. This requires multi-sectoral, collaborations, strong commitment to public and professional education, interaction based on evidence drawn from a variety of traditional, complementary, and alternative sources. Although the understanding of the evidence-base is growing, there is much that is not yet understood. Thus, there is an urgent need for continued research in all areas of falls prevention and treatment in order to better understand the scope of the problem worldwide. In particular, more evidence of the cost-effectiveness of interconnections is needed to develop strategies that are most likely to be effective in specific setting and population sub-groups.

WHO Global Report on Falls Prevention in Older Age

"This book provides the practical recommendations, modifications, types of equipment, and resources that will improve the safety, health, and quality of life of older patients and residents of long-term care facilities. It also includes photocopiable forms and discharge checklists."--BOOK JACKET.

Falls in Older People

This new open access edition supported by the Fragility Fracture Network aims at giving the widest possible dissemination on fragility fracture (especially hip fracture) management and notably in countries where this expertise is sorely needed. It has been extensively revised and updated by the experts of this network to provide a unique and reliable content in one single volume. Throughout the book, attention is given to the difficult question of how to provide best practice in countries where the discipline of geriatric medicine is not well established and resources for secondary prevention are scarce. The revised and updated chapters on the epidemiology of hip fractures, osteoporosis, sarcopenia, surgery, anaesthesia, medical management of frailty, peri-operative complications, rehabilitation and nursing are supplemented by six new chapters. These include an overview of the multidisciplinary approach to fragility fractures and new contributions on pre-hospital care, treatment in the emergency room, falls prevention, nutrition and systems for audit. The reader will have an exhaustive overview and will gain essential, practical knowledge on how best to manage fractures in elderly patients and how to develop clinical systems that do so reliably.

Chart Supplement, Pacific

"In both hospitals and long-term care facilities it's the older patients and residents who are most prone to falling and most vulnerable to serious injury from a fall. Staff must constantly be on the alert for

hazardous situations and know how to deal with falls. This easy-to-read guide provides just the right amount of information needed by health care staff to prevent and manage this common problem among older adults." "This book presents a wealth of practical recommendations, modifications, equipment, and resources that will improve the health and safety of older adult patients and long-term care residents."--BOOK JACKET.Title Summary field provided by Blackwell North America, Inc. All Rights Reserved

Orthogeriatrics

4. EVIDENCE-BASED BEST PREACTICES FOR THE PREVENTION OF FALLS: 4.1 Existing practice guidelines ; 4.2 Best practices for fall prevention ; 4.3 Selecting appropriate approaches according to setting; 4.4 Recovery from a fall ;4.5 Factors influencing client compliance in fall prevention . 5. SUPPORTING FALL PREVENTION STRATEGIES. 6. THE WAY FORWARD; References; List of tables and figures; Appendix A: Risk factors for falls and fall-related ; Appendix B: List of the Public Health Agency of Canada's resources on seniors' falls.

Falls in Older Persons

Falls and fall-related injuries among older adults have emerged as serious global health concerns, which place a burden on individuals, their families, and greater society. As fall incidence rates increase alongside our globally aging population, fall-related mortality, hospitalizations, and costs are reaching never seen before heights. Because falls occur in clinical and community settings, additional efforts are needed to understand the intrinsic and extrinsic factors that cause falls among older adults; effective strategies to reduce fall-related risk; and the role of various professionals in interventions and efforts to prevent falls (e.g., nurses, physicians, physical therapists, occupational therapists, health educators, social workers, economists, policy makers). As such, this Research Topic sought articles that described interventions at the clinical, community, and/or policy level to prevent falls and related risk factors. Preference was given to articles related to multi-factorial, evidence-based interventions in clinical (e.g., hospitals, long-term care facilities, skilled nursing facilities, residential facilities) and community (e.g., senior centers, recreation facilities, faith-based organizations) settings. However, articles related to public health indicators and social determinants related to falls were also included based on their direct implications for evidence-based interventions and best practices.

Report on Seniors' Falls in Canada

"Nurses play a vital role in improving the safety and quality of patient car -- not only in the hospital or ambulatory treatment facility, but also of community-based care and the care performed by family members. Nurses need know what proven techniques and interventions they can use to enhance patient outcomes. To address this need, the Agency for Healthcare Research and Quality (AHRQ), with additional funding from the Robert Wood Johnson Foundation, has prepared this comprehen-sive, 1,400-page, handbook for nurses on patient safety and quality -- Patient Safety and Quality: An Evidence-Based Handbook for Nurses. (AHRQ Publication No. 08-0043)." - online AHRQ blurb, http://www.ahrq.gov/qual/nurseshdbk/

Evidence-Based Practices to Reduce Falls and Fall-Related Injuries Among Older Adults

Comprising a single repository of knowledge and scientific evidence in the field, this book provides strategies to mitigate fall risk by providing information on the complex interactions between aging processes, co-morbid conditions and prescribed medications in older patients. Geriatric health is becoming a more prominent issue as the population ages, and balancing the beneficial effects of medication against the potential and real side-effects in these patients involves a deliberate and thoughtful task: physiologic aging, the accumulation of co-morbidities, and the use of drugs to manage various conditions and symptoms generates a unique set of problems for each patient. Falls are a dreaded event in older people. The event can affect a person in a physical, and psychological manner, resulting in soft tissue and bony injury, fear of falling, and depression. The identification of and reduction in fall risks in older people is a worldwide concern, and reducing the incidence of falls is a ubiquitous quality measure of health care delivery. Heterogeneity amongst older people precludes a single solution. However, physicians and others involved in the care of geriatric patients will benefit from the presented insights into how medication use can be modified to limit its impact as a contributing factor.

Patient Safety and Quality

Falls take the lives of 684 000 people each year. Beyond the death toll, 172 million more people experience disabilities arising from a fall each year. Falls are not only a significant global public health problem – they are a rapidly growing one. Fall-related deaths have risen far faster than any other type of injury over the last two decades. Many factors account for this increase – ageing populations and patterns of urbanization chief among them. The Step Safely technical package provides concrete recommendations for evidence-based strategies to prevent and manage falls for children and adolescents, workers, and older people. Among others, effective prevention measures include parenting programmes for low-income and marginalized families, stricter worker safety regulations, and strength and balance training for older people. Preventing falls can help achieve the Sustainable Development Goals linked to health and well-being, decent work, and safe, inclusive cities. The global community should actively look for opportunities to reduce the growing harm, suffering and loss that result from falls.

Medication-Related Falls in Older People

Despite of the enormous efforts of researchers and clinicians to understand the pathophysiology of falls in older adults and establish preventive treatments, there is still a significant gap in our understanding and treating of this challenging syndrome, particularly when we focus in cognitively impaired older adults. Falls in older adults are a very common yet complex medical event, being the fifth leading cause of death and a main cause of insidious disability and nursing home placement in our world aging population. Importantly, falls in the cognitively impaired double the prevalence of the cognitively normal, affecting up of 60% of older adults with low cognition and increasing the risk of injuries. The past decade has witnessed an explosion of new knowledge in the role of cognitive processes into the falls mechanisms. This was also accompanied with clinical trials assessing the effect of improving cognition via pharmacological and non-pharmacologic approaches to prevent falls and related injuries. Unfortunately, this revolution in emerging interventions left a gap between clinician-scientists and researchers at academic centers where the new data had been generated and the practitioners who care for cognitively impaired patients with falls. Most advances are published in specialty journals of geriatric medicine, neurology, and rehabilitation. The aim of this book is to reduce this gap and to provide practical tools for fall prevention in cognitively impaired populations. The proposed book is designed to present a comprehensive and state-of the-art update that covers the pathophysiology, epidemiology, and clinical presentation of falls in cognitively impaired older adults. We additionally aim to reduce the knowledge gap in the association between cognitive processes and falls for practitioners from a translational perspective: from research evidence to clinical approach. We will address gaps and areas of uncertainty but also we will provide practical evidence-based guidelines for the assessment, approach, and treatment of falls in the cognitively impaired populations. This book is a unique contribution to the field. Existing textbooks on fall prevention focus in global approaches and only tangentially address the cognitive component of falls and not purposely address special populations and/or settings as residential care and nursing homes. Due to the expected increase of proportion of older adults with cognitive and mobility impairments, this book is also valuable for the whole spectrum of the health care of the elderly. By including a transdisciplinary perspective from geriatric medicine, rehabilitation and physiotherapy medicine, cognitive neurology, and public health, this book will provide a practical and useful resource with wide applicability in falls assessment and prevention.

Step safely

Falls in older people is acomprehensive guide to preventing and managing falls in hospitals and long-term care settings. Jam-packed with practical strategies, assessment tools, and management practices, Falls in Older People includes all the medical, rehabilitative, and environmental strategies, needed in any care setting to protect the safety and health of at-risk older adults.

Falls and Cognition in Older Persons

This issue of Clinics in Geriatric Medicine, Guest Edited by Dr. Steven Castle, is devoted to Falls Prevention. Articles in this important issue include: Key components of exercise programs in community to prevent falls; Potential reasons deaths from falls in older adults have doubled in the past decade; Link between Primary care and community-based balance exercise programs; Role of foot orthoses and shoe insoles at improving mobility and balance; Blood Pressure control and falls risk; Optimizing function and physical activity in hospitalized older adults to prevent functional decline and falls; Delirium

as it relates to falls; Virtual sitters; Redesigning a Fall Prevention Program in Acute Care: Building on Evidence; and Nursing Unit Design and Hospital Falls.

Falls in Older People

Offering a comprehensive look at physical therapy science and practice, Guccione’s Geriatric Physical Therapy, 4th Edition is a perfect resource for both students and practitioners alike. Year after year, this text is recommended as the primary preparatory resource for the Geriatric Physical Therapy Specialization exam. And this new fourth edition only gets better. Content is thoroughly revised to keep you up to date on the latest geriatric physical therapy protocols and conditions. Five new chapters are added to this edition to help you learn how to better manage common orthopedic, cardiopulmonary, and neurologic conditions; become familiar with functional outcomes and assessments; and better understand the psychosocial aspects of aging. In all, you can rely on Guccione’s Geriatric Physical Therapy to help you effectively care for today’s aging patient population. Comprehensive coverage of geriatric physical therapy prepares students and clinicians to provide thoughtful, evidence-based care for aging patients. Combination of foundational knowledge and clinically relevant information provides a meaningful background in how to effectively manage geriatric disorders Updated information reflects the most recent and relevant information on the Geriatric Clinical Specialty Exam. Standard APTA terminology prepares students for terms they will hear in practice. Expert authorship ensures all information is authoritative, current, and clinically accurate. NEW! Thoroughly revised and updated content across all chapters keeps students up to date with the latest geriatric physical therapy protocols and conditions. NEW! References located at the end of each chapter point students toward credible external sources for further information. NEW! Treatment chapters guide students in managing common conditions in orthopedics, cardiopulmonary, and neurology. NEW! Chapter on functional outcomes and assessment lists relevant scores for the most frequently used tests. NEW! Chapter on psychosocial aspects of aging provides a well-rounded view of the social and mental conditions commonly affecting geriatric patients. NEW! Chapter on frailty covers a wide variety of interventions to optimize treatment. NEW! Enhanced eBook version is included with print purchase, allowing students to access all of the text, figures, and references from the book on a variety of devices.

Falls Prevention, An Issue of Clinics in Geriatric Medicine

Falls are a major health challenge and represent the leading cause of accidental death in older adults. It is essential to identify those factors associated with an increased risk for falls and to develop specific programs for fall prevention. The risk of falling can be assessed in older adults using different parameters, including biological, psychosocial, socioeconomic, behavioral, and environmental factors. For example, the risk of falls increases when vision is impaired, when sleep quality is poor, or when mood is depressed. Moreover, physical parameters, such as changes in body mass and blood pressure are risk factors for falls in older adults.

Guccione's Geriatric Physical Therapy E-Book

This issue features such article topics as epidemiology of falls in older adults, exercise for fall prevention, cardiac causes of falls and their treatment, medications and falls, vision and fall prevention, and more.

Falls in Older Adults: Prevention and Risk Evaluation

In today's world, healthy aging and a fulfilling lifestyle are important to older members of society, with many opting to remain as independent and mobile as possible for as long as possible. However, elderly individuals tend to have a variety of functional limitations that can increase the likelihood of debilitating falls and injuries. Assessments of functionality are very often only performed following an accident, which implies a hindsight bias because results do not necessarily reflect pre-accidental performance capacities. Furthermore, these belated measures do little to reduce the likelihood of new falls. As such, it is imperative that personalized preventative approaches are taken to prevent falls. Integrated Care and Fall Prevention in Active and Healthy Aging contains state-of-the-art research and practices related to integrated care, fall prevention, and aging throughout areas ranging from medical to social aspects of care, health economy, standards, pathways and information scopes, practices and guidelines, technology, etc. Covering topics such as active care and healthy aging, it is ideal for doctors, gerontologists, nursing home and long-care facility staff, scientists, researchers, students, academicians, and practitioners working in care pathways involving good practices of fall prevention in home care and community care settings.

Falls and Their Prevention

CiteSpace is a freely available computer program written in Java for visualizing and analyzing literature of a scientific domain. A knowledge domain is broadly defined in order to capture the notion of a logically and cohesively organized body of knowledge. It may range from specific topics such as post-traumatic stress disorder to fields of study lacking clear-cut boundaries, such as research on terrorism or regenerative medicine. CiteSpace takes bibliographic information, especially citation information from the Web of Science, and generates interactive visualizations. Users can explore various patterns and trends uncovered from scientific publications, and develop a good understanding of scientific literature much more efficiently than they would from an unguided search through literature. The full text of many scientific publications can be accessed with a single click through the interactive visualization in CiteSpace. At the end of a session, CiteSpace can generate a summary report to summarize key information about the literature analyzed. This book is a practical guide not only on how to operate the tool but also on why the tool is designed and what implications of various patterns that require special attention. This book is written with a minimum amount of jargon. It uses everyday language to explain what people may learn from the writings of scholars of all kinds.

Integrated Care and Fall Prevention in Active and Healthy Aging

Information for older people, their families or health care providers on how to avoid falls in the home and outside.

Prevention of Falls and Injuries Among the Elderly

Fall Prevention precautions for Seniors 60 and Above is a comprehensive guide to helping seniors reduce their risk of falls. This essential resource provides evidence-based strategies for creating a safe home environment, maintaining strength and balance, and managing other fall risk factors. The book is divided into five parts: Part I: Understanding Fall Prevention. This section provides an overview of fall prevention, including the importance of fall prevention, risk factors for falls, and types of falls and their consequences. It also includes a chapter on assessing your fall risk. Part II: Creating a Safe Home Environment. This section focuses on making your home safer and reducing the risk of falls. It covers topics such as fall-proofing your home, choosing the right safety equipment, and minimizing hazards. It also discusses the importance of lighting, visibility, accessibility, and mobility. Part III: Maintaining Strength and Balance. This section is dedicated to helping you maintain strength and balance, which are essential for preventing falls. It covers the benefits of exercise for fall prevention and provides a variety of exercises to improve your strength and balance. It also discusses how to modify exercises for everyday activities and stay active and safe. Part IV: Other Fall Prevention Strategies. This section covers other fall prevention strategies, such as medication management, vision and hearing, nutrition and hydration, and social support and engagement. It discusses the importance of each of these factors and provides tips on how to manage them to reduce your risk of falls. Part V: Living Well and Preventing Falls. This section focuses on living well and preventing falls. It covers topics such as creating a fall prevention plan, communicating your needs to others, and staying positive and hopeful. Fall Prevention precautions for Seniors 60 and Abovei s written in a clear and concise style, making it easy to understand and

implement the strategies discussed. It is also packed with helpful tips and resources, making it the perfect guide for seniors who want to reduce their risk of falls and live a safe and active life. In addition to the benefits listed above, here are some additional reasons why you should read **Fall Prevention for Seniors 60 and Above. It is up-to-date and comprehensive. The book covers all aspects of fall prevention, from creating a safe home environment to maintaining strength and balance to managing other fall risk factors. It also includes the latest research on fall prevention. It is written by experts. The book is written by a team of experienced healthcare professionals who are passionate about helping seniors stay safe and healthy. It is practical and easy to use. The book is full of helpful tips and strategies that you can implement right away to reduce your risk of falls. It is also written in a clear and concise style, making it easy to understand. It is inspiring. The book features stories of other seniors who have successfully reduced their risk of falls. These stories can help you stay motivated and hopeful on your own journey to fall prevention. If you are a senior or care for a senior, Fall Prevention for Seniors 60 and Above is a must-read. Order your copy today and start living your best life!

CiteSpace

The National Institute for Clinical Excellence (NICE) commissioned the National Collaborating Centre for Nursing and Supportive Care (NCC-NSC) to develop guidelines on the assessment and prevention of falls in older people. This follows referral of the topic by the Department of Health and Welsh Assembly Government. This document describes the methods for developing the guidelines and presents the resulting recommendations. It is the source document for the NICE (abbreviated version for health professionals) and Information for the public (patient) versions of the guidelines that are published by NICE. A multidisciplinary Guideline Development Group produced the guidelines and the development process was undertaken by the NCC-NSC. The main areas examined by the guideline were: the evidence for factors that increase the risk of falling; the most effective methods of assessment and identification of older people at risk of falling; the most clinically and cost effective interventions and preventative strategies for the prevention of falls; the clinical effectiveness of hip protectors for the prevention of hip fracture; the most clinically and cost effective interventions and rehabilitation programmes for the prevention of further falls; older peoples' views and experiences of falls prevention strategies and programmes.

Fall Prevention for Older People

A step-by-step guide to conducting research in medicine, public health, and other health sciences, this clear, practical, and straightforward text demystifies the research process and empowers students (and other new investigators) to conduct their own original research projects.

Otago Exercise Programme to Prevent Falls in Older Adults

Preventing Patient Falls presents the authoritative Morse Fall Scale for predicting the likelihood of a patient falling. The book is the culmination of the author's eight years of research into patient falls and what can be done to prevent them. Full guidance is given on implementing the Morse Fall Scale within a comprehensive fall prevention programme. An extensive range of direct practice issues is tackled.

WHO Global Report on Falls Prevention in Older Age

The Stepping On program is a community-based falls-prevention program that shows participants how to reduce falls, increase confidence and maintain personal independence. Originally developed in Australia, based on research and scientifically proven to work, the Stepping On program is now internationally recognised as best practice in falls prevention. The Stepping On manual is aimed at health workers with a passion for aged care. It offers a step-by-step guide to running the seven-week group program, plus essential background information. Topics covered include understanding the risk of falls, identifying home hazards, the role of vision in causing and preventing falls, staying safe in public places, strength and balance exercises, and much more. The manual includes a guide to useful resources, handouts for group participants, and suggestions for recruitment and evaluation. This new edition has been thoroughly revised and redesigned to incorporate cutting-edge research, professional feedback, and over fifteen years' experience of running of the program. As well as the latest fall-prevention research, the revised manual contains an expanded section on working with culturally and linguistically diverse groups, simplified exercises for participants to do at home, and new stories and illustrations. 'This is an invaluable manual incorporating the latest evidence for falls prevention in the community.' Professor Lyn March AM, University of Sydney and Royal North Shore Hospital, Sydney

‘This new Stepping On manual will be a wonderful resource for many health professionals like myself who work with patients who have had falls and fractures. It is definitely my “go-to” resource in our very busy clinic!’ Lillias Nairn, North Shore Ryde Health Service A range of handouts and supplementary materials are available for download. Please click on the Table of Contents tab for links to download the supplementary materials.

Fall Prevention Precautions for Seniors 60 and Above

This publication provides a comprehensive guide to the assessment and management of foot and ankle problems in older people.

Clinical Practice Guideline for the Assessment and Prevention of Falls in Older People

This review was undertaken to support the U.S Preventive Services Task Force (USPSTF) in updating its 1996 recommendation on prevention of falls in older adults, which was part of its general review on household and recreational injuries. The 1996 USPSTF review found sufficient evidence that certain interventions reduce the risk for falls. This review found insufficient evidence, however, that counseling could be generalized to the primary care setting or that counseling reduced fall risk factors or the incidence of falls. The USPSTF also found insufficient evidence to recommend for or against the routine use of external hip protectors to prevent fall injuries. Issues requiring rectification for the USPSTF to change its recommendations include evidence showing that: primary care feasible interventions reduce the risk for falls or fall-related injuries in high-risk older adults; the general population benefits from these interventions; primary care counseling reduces the incidence of falling or fall-related injuries; primary care counseling is effective in encouraging older adults to increase their physical activity levels; and screening (balance and gait, visual acuity, ophthalmoscopic exam, dementia or altered mental status) reduces incidence of falls or fall-related injuries. A fall is “an unexpected event in which the participant comes to rest on the ground, floor, or lower level.” Because no single definition for a fall was consistently used across studies, we use the definition of a fall used by each reviewed study to maximize the number of included studies in the current review. People aged 65 years and older represent the fastest-growing segment of the U.S. population. Falls are associated with many adverse health outcomes, including injury and death. In 2003, the Centers for Disease Control and Prevention reported that falls were the leading cause of injury deaths, and the ninth leading cause of death from all causes, among those 65 years of age and older. Falls and fall-related injuries increase with age. Hip fractures are an especially grave complication of falls in older adults, resulting in more hospital admissions than any other injury. There is a 10% to 20% reduction in expected survival during the first year following a hip fracture, and roughly half of the survivors never recover normal function. Falls also predict quality of life and disability. Twenty to 30% of those who fall suffer injuries that result in decreased mobility that limits subsequent independence. Even falls that do not result in injury can lead to negative outcomes. In particular, experiencing a fall can increase an older person's fear of falling, an important psychological outcome correlated with future falls. Fear of falling leads older adults with and without a history of falling to limit activities, which eventually increases fall risk through functional decline, deterioration in perceived health status, and increased risk for admission to institutional care. KQ 1: Is there direct evidence that primary care interventions reduce fall-related injury, improve quality of life, reduce disability, or reduce mortality when used alone or in combination to reduce falling in community-dwelling older adults? 1a. Do these interventions reduce injury, improve quality of life, reduce disability, or reduce mortality in older adults specifically identified as high risk for falls? KQ 2: Do primary care interventions used alone or in combination in community-dwelling older adults prevent falling? 2a. Do these interventions prevent falling in older adults specifically identified as high risk for falls? 2b. Are there positive outcomes other than reduced falling, and related morbidity and mortality, that result from primary care interventions to prevent falling? KQ 3: What are the adverse effects associated with interventions to prevent falling? KQ 4: How are high-risk older adults identified for primary care interventions to prevent falling?

Introduction to Health Research Methods

This book presents an exciting new synthesis of directed and undirected, discrete and continuous graphical models. Combining elements of Bayesian networks and Markov random fields, the newly introduced hybrid random fields are an interesting approach to get the best of both these worlds, with an added promise of modularity and scalability. The authors have written an enjoyable book---rigorous in the treatment of the mathematical background, but also enlivened by interesting and original historical and philosophical perspectives. -- Manfred Jaeger, Aalborg Universitet The book not only marks an

effective direction of investigation with significant experimental advances, but it is also---and perhaps primarily---a guide for the reader through an original trip in the space of probabilistic modeling. While digesting the book, one is enriched with a very open view of the field, with full of stimulating connections. [...] Everyone specifically interested in Bayesian networks and Markov random fields should not miss it. -- Marco Gori, Università degli Studi di Siena Graphical models are sometimes regarded---incorrectly---as an impractical approach to machine learning, assuming that they only work well for low-dimensional applications and discrete-valued domains. While guiding the reader through the major achievements of this research area in a technically detailed yet accessible way, the book is concerned with the presentation and thorough (mathematical and experimental) investigation of a novel paradigm for probabilistic graphical modeling, the hybrid random field. This model subsumes and extends both Bayesian networks and Markov random fields. Moreover, it comes with well-defined learning algorithms, both for discrete and continuous-valued domains, which fit the needs of real-world applications involving large-scale, high-dimensional data.

Emergency Department Visits by Persons Aged 65 and Over

Children are already learning at birth, and they develop and learn at a rapid pace in their early years. This provides a critical foundation for lifelong progress, and the adults who provide for the care and the education of young children bear a great responsibility for their health, development, and learning. Despite the fact that they share the same objective - to nurture young children and secure their future success - the various practitioners who contribute to the care and the education of children from birth through age 8 are not acknowledged as a workforce unified by the common knowledge and competencies needed to do their jobs well. Transforming the Workforce for Children Birth Through Age 8 explores the science of child development, particularly looking at implications for the professionals who work with children. This report examines the current capacities and practices of the workforce, the settings in which they work, the policies and infrastructure that set qualifications and provide professional learning, and the government agencies and other funders who support and oversee these systems. This book then makes recommendations to improve the quality of professional practice and the practice environment for care and education professionals. These detailed recommendations create a blueprint for action that builds on a unifying foundation of child development and early learning, shared knowledge and competencies for care and education professionals, and principles for effective professional learning. Young children thrive and learn best when they have secure, positive relationships with adults who are knowledgeable about how to support their development and learning and are responsive to their individual progress. Transforming the Workforce for Children Birth Through Age 8 offers guidance on system changes to improve the quality of professional practice, specific actions to improve professional learning systems and workforce development, and research to continue to build the knowledge base in ways that will directly advance and inform future actions. The recommendations of this book provide an opportunity to improve the quality of the care and the education that children receive, and ultimately improve outcomes for children.

Preventing Patient Falls

Stepping On: Building Confidence and Reducing Falls 3rd edn