

Our Vision: Milwaukee County will be a national leader in the prevention of falls in the adult population through community education, collaboration, and innovation

AdvocateAuroraHealth

Milwaukee County Falls Prevention Coalition Resource Series Clinician Guide to Fall Prevention through Virtual Visits

Background

- Patients are more likely to connect with providers virtually during the COVID-19 pandemic, including both e-visits over the phone and tele visits using real-time audio and video.
- CMS has waived restrictions that limit which patients may receive a tele visit.
- Social distancing has necessitated cancelling routine medical care and patients are more fearful to seek care, leading to concerns about long-term health effects.
- High risk patients including vulnerable older adults will likely continue virtual visits for routine and non-urgent care after social distancing guidelines are relaxed.

Practical Tips

- Engage family members in virtual visits, particularly for patients with cognitive impairment.
- Inventory what electronic devices the person is familiar with and ways to facilitate the tele visit.
- All individuals should practice before a tele visit to be sure equipment and connections are working.
- At the time of the visit, the patient should be ready with medications, questions, and an agenda just as they would for an in-person visit.
- Evaluate the patient for cognitive impairment through observation of behaviors and their ability to complete tasks including activities of daily living (ADLs).
- Use verbally-based cognitive screenings such as the <u>Short Blessed Test</u> or <u>Telephone Interview for</u> <u>Cognitive Status</u> (cost associated) during e-visits over the phone.
- Ask the following key questions as part of virtual visit for patients 65 and older
 - Have you fallen in the past year?
 - Do you feel unsteady when standing or walking?
 - Do you worry about falling?
- Be aware of the home environment during video visits, particularly risk factors for falls such as lack of assistive devices, clutter, and tripping hazards. Consider a virtual tour of the environment.
- Assess gait and balance by having the patient get up from the chair and walk around if the patient is steady or a caregiver is present.
- If the patient is unsteady walking, use the <u>30-Second Chair Stand</u> as a stationary fall screening test.

Additional Resources

<u>Alzheimer's Association</u> – Resources and tools for providers and health systems. Information and referral forms for Direct Connect program attached in email.

<u>CDC STEADI</u> – Pocket guide for physicians to guide screening and fall prevention conversations.

<u>30-Second Chair Stand Test (video)</u> – Demo of stationary fall screening and functional assessment

References:

Centers for Disease Control and Prevention: Stopping Elderly Accidents, Deaths and Injuries (STEADI). https://www.cdc.gov/steadi.

Schrack, J. A., Wanigatunga, A. A., & Juraschek, S. P. (2020). After the COVID-19 Pandemic: The Next Wave of Health Challenges for Older Adults. The Journals of Gerontology Series A: Biological Sciences and Medical Sciences. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7188185/

Costanzo, M. C., Arcidiacono, C., Rodolico, A., Panebianco, M., Aguglia, E., & Signorelli, M. S. (2020). Diagnostic and interventional implications of telemedicine in Alzheimer's disease and mild cognitive impairment: A literature review. *International Journal of Geriatric Psychiatry*, 35(1), 12-28.