

# Multifactorial day hospital intervention to reduce falls in high risk older people in primary care

**Submission date**  
09/05/2005

**Recruitment status**  
No longer recruiting

Prospectively registered

Protocol

**Registration date**  
26/05/2005

**Overall study status**  
Completed

Statistical analysis plan

Results

**Last Edited**  
02/02/2011

**Condition category**  
Injury, Occupational Diseases, Poisoning

Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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### Contact details

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## Additional identifiers

### Protocol serial number

Protocol number 6.5, R&D reference 04ME03

## Study information

Scientific Title

Multifactorial day hospital intervention to reduce falls in high risk older people in primary care: a multi-centre randomised controlled trial

## **Study objectives**

The main hypothesis to be tested is that a multidisciplinary falls assessment and intervention occurring at a Geriatric Day hospital can decrease the rate of falls over the course of one year, in older people identified in primary care as being at high risk of falling.

Secondary research questions:

1. Can the above intervention reduce the proportion of people with single or recurrent falls (greater than 1)?
2. Can the above intervention reduce fall-related injuries (including fractures)?
3. Can the above intervention reduce disability and improve quality of life?
4. Can the above intervention reduce institutionalisation and the need for the use of health services?
5. Is the intervention cost-effective and might it lead to overall cost-savings?
6. Can a screening questionnaire used in primary care reliably distinguish between low and high risk of falling?
7. Is there any difference in deaths between the two groups?

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

Added 08/09/2009: COREC approval has been obtained from the Nottingham main REC and the relevant local RECs (reference: 04/Q2404/93).

## **Study design**

Randomised controlled trial

## **Primary study design**

Interventional

## **Study type(s)**

Prevention

## **Health condition(s) or problem(s) studied**

Falls

## **Interventions**

Intervention arm:

Screening questionnaire, information leaflet, leaflet on falls prevention and invitation to attend the day hospital for assessment and any subsequent intervention.

Control arm:

Screening questionnaire, information leaflet, leaflet on falls prevention and usual care from primary care service until outcome data collected, then offer of day hospital intervention.

## **Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome(s)**

The proportion of older people who fall over one year, identified in primary care as being at high risk of falling

**Key secondary outcome(s)**

Added 08/09/2009:

1. Proportion of people with single or recurrent falls (greater than 1)
2. Fall-related injuries: fracture, serious sprain requiring immobilisation in plaster, joint dislocations, head injury requiring hospitalisation, and lacerations requiring suturing
3. Disability: Nottingham Extended Activities of Daily Living Scale; Barthel Index of Daily Living; Quality of life: Falls Efficacy Scale and EuroQoL-5
4. Institutionalisation and use of health services: residency and diary information
5. Cost analysis
6. Screening tool, defined by sensitivity/specificity as well as positive and negative predictive values
7. Deaths will be checked against PCT records and measured as proportions

**Completion date**

31/05/2006

**Eligibility****Key inclusion criteria**

The study population will comprise men and women aged 70 and over identified as being at high risk of falling by a postal screening questionnaire, registered with the participating general practices in Nottinghamshire and Derbyshire.

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Senior

**Sex**

All

**Key exclusion criteria**

1. Patients already attending one of the day hospitals
2. Patients under follow-up with an existing primary care based falls prevention scheme
3. Residents in nursing or residential homes
4. Patients with terminal illnesses
5. Those unwilling or unable to travel to the day hospital (using transport as provided)

**Date of first enrolment**

01/09/2004

**Date of final enrolment**

31/05/2006

## Locations

**Countries of recruitment**

United Kingdom

England

**Study participating centre**

**Department of Rehabilitation and the Clinical Gerontology Research Unit**

Nottingham

United Kingdom

NG5 1PB

## Sponsor information

**Organisation**

Nottingham City Hospital (UK)

**ROR**

<https://ror.org/0022b3c04>

## Funder(s)

**Funder type**

Research organisation

**Funder Name**

Nottinghamshire, Derbyshire and Lincolnshire Research Alliance (UK)

**Funder Name**

Research into Ageing/British Geriatrics Society (UK) - Dhole fellowship (ref: DF/04)

## Results and Publications

## Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/11/2010		Yes	No
<a href="#">Protocol article</a>	protocol	27/02/2006		Yes	No