

# Development of an interprofessional educational (IPE) experience wellness clinic to reduce fall risk in community dwelling seniors

Collin M. Clark, PharmD Candidate<sup>1</sup>, Arielle Fleming, DPT Candidate<sup>2</sup>, Patricia Ohtake, PT, PhD<sup>2</sup>, Robert G. Wahler Jr., PharmD, CPE<sup>1</sup>

<sup>1</sup>The University at Buffalo School of Pharmacy and Pharmaceutical Sciences, <sup>2</sup>The University at Buffalo School of Public Health and Health Professions

## Purpose

- To describe the development of an interprofessional wellness clinic designed to reduce fall risk in community dwelling seniors and educate them on medication safety and physical safety through balance techniques.
- To serve as a pilot program for future opportunities for interprofessional collaboration and research.

## Methods

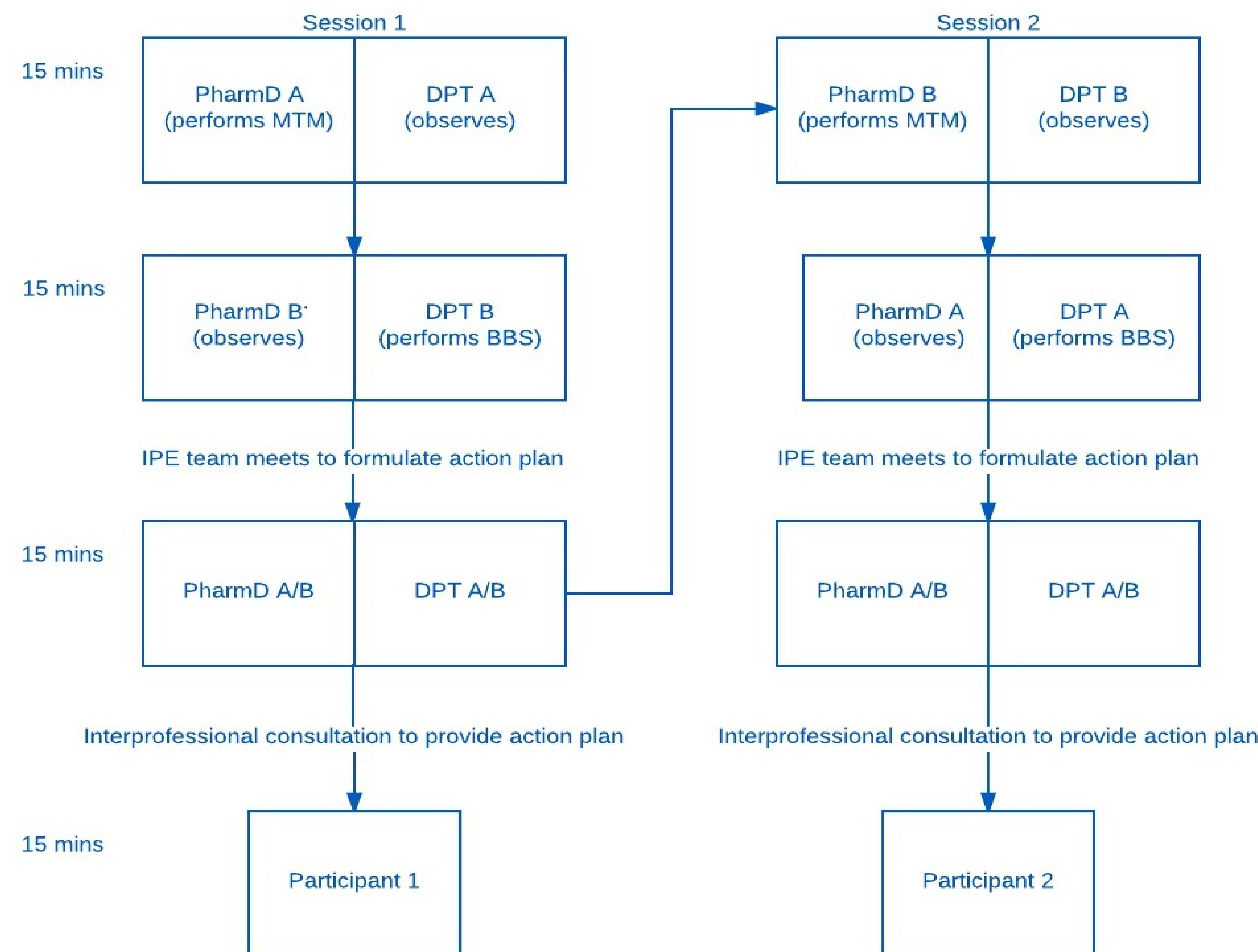
- This wellness clinic pilot program took place in 3 phases between March and September 2016.
- Phase 1: PharmD and DPT students educated each other on their professions and demonstrated targeted falls risk medication therapy management (MTM) and the Berg Balance Scale respectively.<sup>1,2</sup>
- Phase 2: A “dry run” of the planned clinic assessments performed on simulated participants to delineate workflow.
- Phase 3: Clinic was offered at a local senior living facility for 8 seniors on Fall Prevention Awareness Day, Sept. 22, 2016 - the first day of Fall.
- Each participant was seen by a PharmD student for medication reconciliation with a DPT student observing.
- Participants would then be seen by a different team of PharmD and DPT students in which the DPT student would administer the Berg Balance Scale assessment.
- The participant would then be excused and the IPE team meet to discuss action plan.
- IPE team provided participant with education on fall risk factors and provided specific action plan to reduce these risks.



## References

- Berg, K. and K.E. Norman, *Functional assessment of balance and gait*. Clin Geriatr Med, 1996. 12(4): p. 705-23.
- Heiermann, A., et al., *Validation of a Novel Medication Profile Based Falls Risk Assessment Tool*. Journal of the American Pharmacists Association, 2016. 56(3): p. e43-e44.

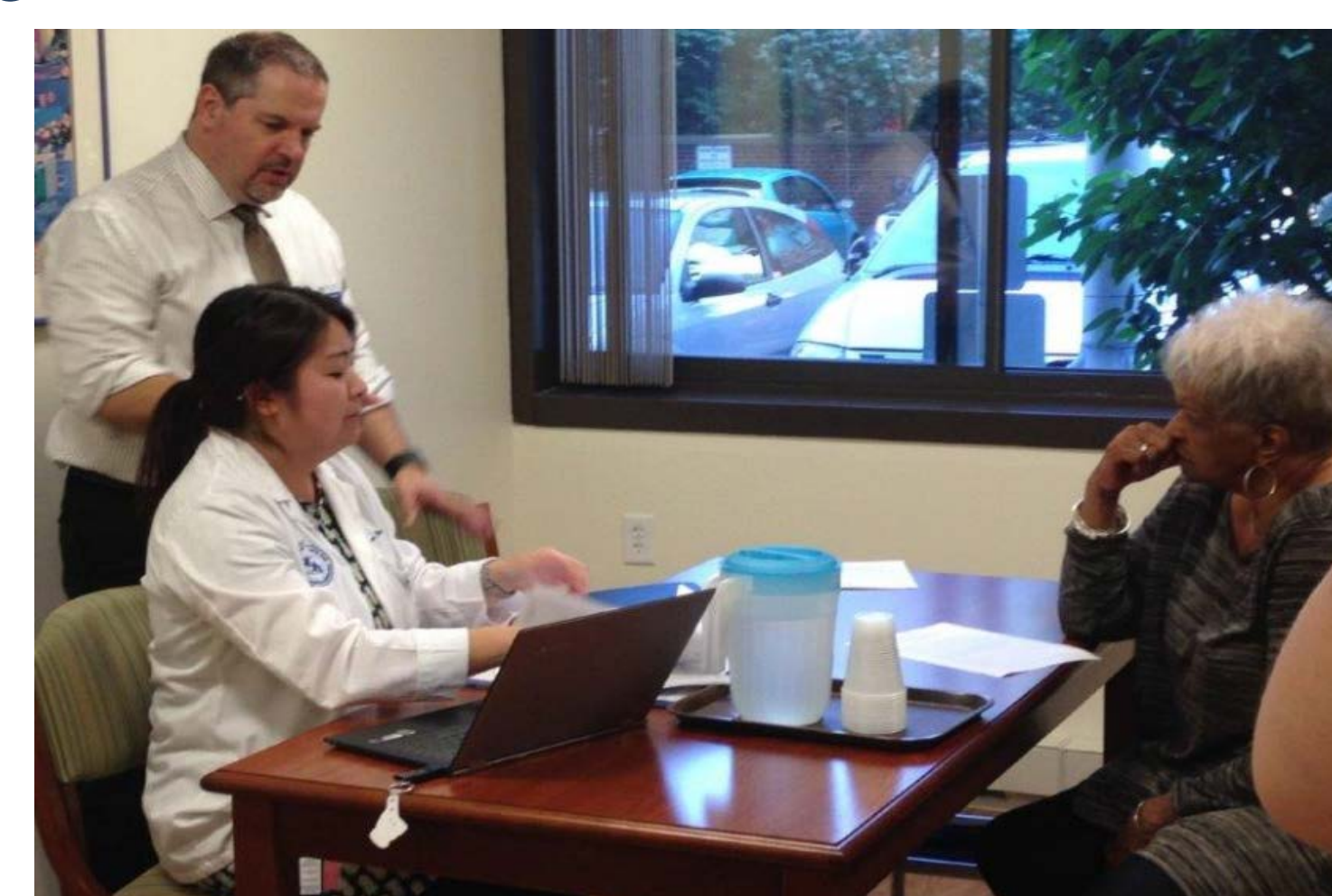
## Overview of Clinic Design



## Assessment Tools

### Medication Fall Risk Assessment Tool (MFRAT)

- Integrated with MTM process
- Fall risk increasing drugs (FRIDs) on a patient's medication list results in a grade point deduction.
- Deliverables include a Patient Medication Record (PMR), Medication Action Plan (MAP) and the Medication Report Card (MaRCS) fall risk grade.



### Berg Balance Scale (BBS)

- The Berg Balance Scale is a 14-item scale used to measure balance among older people.
- Each item assess the patient's ability to complete a functional task.
- This test can be used to evaluate effectiveness of interventions or for a quantitative description of the patient's function.



## Results

- 10 PharmD students and 10 DPT students participated in the various phases of this IPE activity.
- Clinic assessments were performed collaboratively with 4 participants in Phase 2 and 8 participants in Phase 3.
- This IPE activity helped student's gain an understanding of patient assessment techniques used by other health care professionals.
- Students gained an appreciation for the multifactorial nature of falls in the elderly differing recommendations between professions.
- Established a workflow to perform future interprofessional wellness clinics to assess fall risk in community dwelling seniors.
- Participants were educated on medications and strength/balance related risks for falls and provided with strategies or alternatives to improve these risk factors.
- A relationship was established with Baptist Manor as a partner to help facilitate future efforts to promote health and wellness within the community.
- Feedback for future clinics included the following suggestions for improvements:

1. Ensure to remind the participants of the reason for the encounter and to clearly state the roles of all involved.
2. Suggested pharmacy review patient medications prior to clinic to develop preliminary MAP and stratify patients who may require more time to work with.
3. Inclusion of an observer during assessments during Phase 3 of the clinic was not seen as beneficial to some students.

## Conclusions

- An interprofessional team approach to falls risk reduction may be beneficial to community dwelling elderly patients as it addresses both physical and medication related risks of falling.
- DPT and PharmD students can work complementarily to provide comprehensive information to patients about fall risk reduction.
- Development of this wellness clinic offers opportunities for interprofessional collaboration and research.