

Can a user-centered, digital multifactorial falls risk assessment tool improve falls risk management in primary care?

Sara S. Groos, Annemiek J. Linn, Judith I. Kuiper, Natasja M. van Schoor, Julia C.M. van Weert, Nathalie van der Velde

Introduction: Usability problems hinder the implementation and subsequent adoption of multifactorial falls risk assessment tools in older adults in primary care. Using User-Centered Design, this pilot study aims to test the implementation of a digital multifactorial falls risk assessment tool (i.e., ‘Valanalyse 2.0’) in Dutch primary care whose usability and user experience were optimized together with end-users (i.e., health care professionals).

Method: A pilot study using survey and interview data was conducted. Participating HCPs, such as occupational therapists, physical therapists, district nurses and nurse practitioners, were stratified at the practice level. The intervention group (n = 11) attended an in-person training and used the ‘Valanalyse 2.0’ to identify and treat individual falls risk factors during consultations with older adults (n = 36). The care-as-usual group (n = 9) provided falls risk management care-as-usual during consultation with older adults (n = 22).

Results: The pilot study is currently ongoing and results will be presented in Dutch. We anticipate to present the feasibility and acceptability of the ‘Valanalyse 2.0’ among HCPs, and the requirements for sustained use (primary outcomes). Additionally, we will present differences in HCPs falls risk management behavior and older adults motivation to adhere to advices between the ‘Valanalyse 2.0’ and care-as-usual group (secondary outcomes).

Discussion/conclusion: The findings of this study will provide valuable insight into whether multifactorial FRATs that are developed with end-users can optimize falls risk and factors management. Additionally, the findings will shed light into potential up-scaling and directions for sustainable implementation of the tool in practice.