



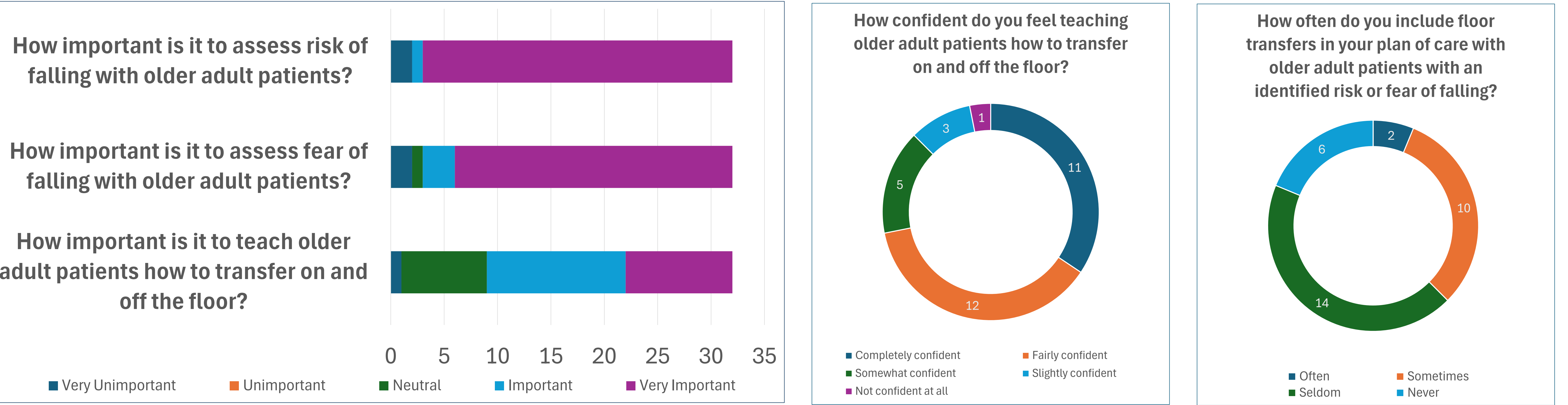
PERCEPTIONS AND ATTITUDES OF PERFORMING FLOOR TRANSFERS WITH OLDER ADULTS IN HOME HEALTH

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BACKGROUND In the US, falls are the leading cause of injury and death among older adults. Approximately 28-36% of older adults (aged 65 years or older), will experience falls each year. Among older adults who fall, one-half cannot get up and remain on the ground. Getting up from the ground in a timely manner is important for the long-term health of older adults. Those who stay on the floor for an hour after a fall are more likely to die within six months.

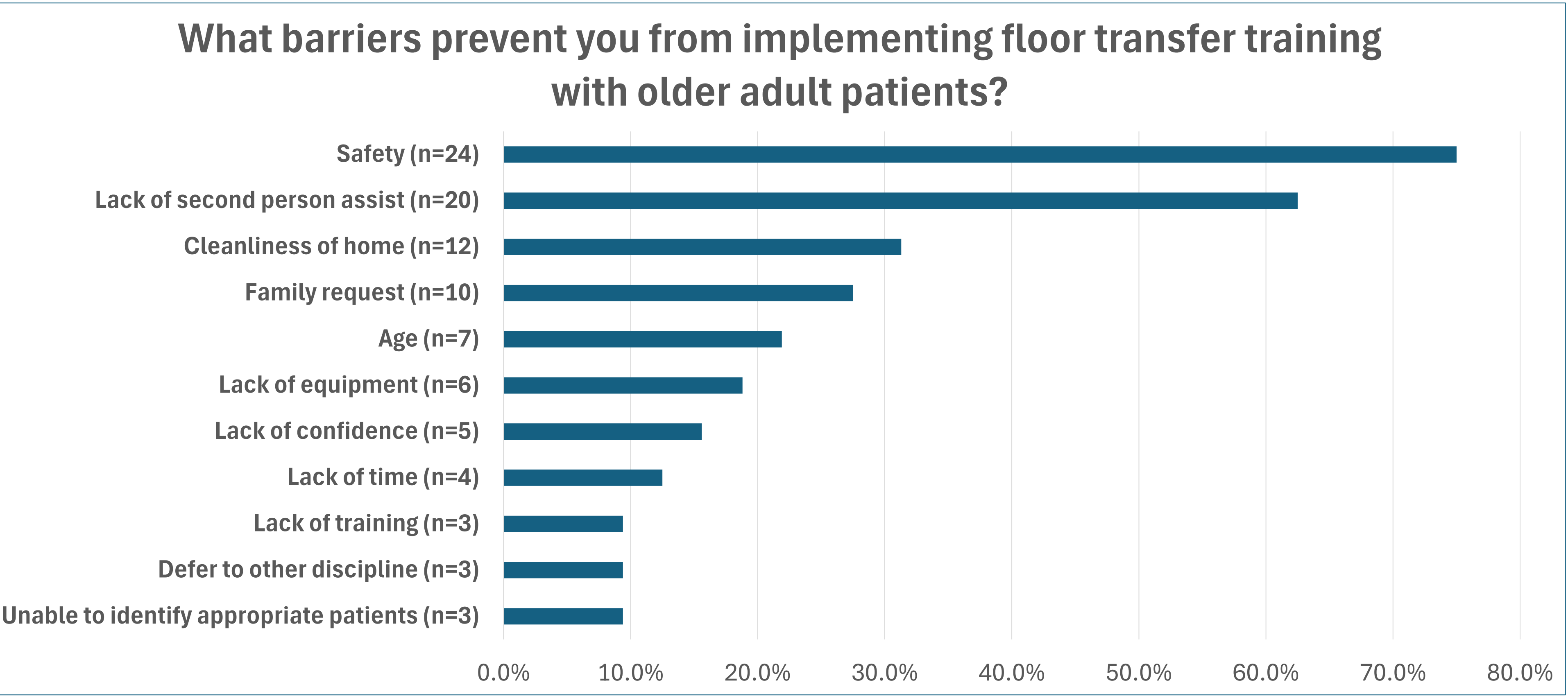
PURPOSE Although the frequency and impact of falls among older adults is well established, little is known about the perceptions and attitudes of licensed rehabilitation therapists (physical therapists, physical therapist assistants, occupational therapists and occupational therapist assistants) in performing transfer training with older adults in the home health setting. The purpose of this study is to explore the perceptions and attitudes of rehabilitation therapists on performing floor transfers with older adults and to develop a better understanding of practice patterns of home health therapists.

METHODS A 20-question electronic survey was developed and distributed online to rehabilitation staff working in the home health setting. A total of 32 rehabilitation clinicians completed the survey (n=19 physical therapists, n=7 physical therapist assistants, n=6 occupational therapists), half of those surveyed had >20 years of clinical experience (n=16).



RESULTS 93.8% (n=30) of respondents felt it “very important” or “important” to assess the risk of falling and fear of falling with older adult patients. 71.9% (n=23) felt “completely confident” or “fairly confident” in teaching floor transfers, yet only 6.3% (n=2) include floor transfers “often” in treatment plans. Identified barriers preventing implementation of floor transfer training with older adult patients included safety (n=24), lack of a second person to assist (n=20), cleanliness of the home (n=12), and family request (n=10).

CONCLUSION Most rehabilitation clinicians working with older adults in the home health setting recognize the importance of assessing risk of falling and fear of falling, yet clinicians seldom practice floor transfers with their older adult patients. Recognizing barriers and practice patterns of therapists implementing floor transfer training in home health may lead to professional development opportunities in falls preparedness training and an identification of resources that would allow therapists to best meet the needs of their patients.



REFERENCES & SUPPORT

