

# The feasibility of using community pharmacists to counsel older adults on fall prevention

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**This study demonstrates that pharmacists, in partnership with local area agencies on aging, are well-positioned to counsel older adults on fall risk and prevention.**



## BACKGROUND

Despite recognition as a serious public health problem, older adult deaths due to falls increased 30% between 2007-2016<sup>1</sup>. Numerous evidence-based fall prevention programs exist, but may have inadequate reach<sup>2</sup>. Pharmacists are highly trained and accessible clinicians who have potential to counsel on fall prevention<sup>3,4</sup>. The purpose of this study was to describe the reach of a fall prevention outreach event conducted by a large national pharmacy chain, Walgreens, in partnership with local area agencies on aging (AAAs).

## HYPOTHESIS

Walgreens pharmacists in Ohio will counsel significantly more patients on fall prevention/risk on “Senior Day”, and will be significantly more aware of AAAs services compared to non-Ohio Walgreens pharmacists.

## METHODS

**Study Design:** On August 7, 2018, Walgreens stores nationwide held a “Senior Day” event during which older patients were incentivized to speak with pharmacists about their fall risk and learn about prevention strategies. In Ohio, AAAs provided pharmacists with written educational materials and information on local AAA fall prevention programs. A random sample of pharmacists nationally were sent a follow-up survey to assess the program’s reach, except in Ohio where all pharmacists received the survey. We analyzed the post-Senior Day survey results from pharmacists to examine the difference between intervention (Ohio stores) and control stores (random sample of stores in other states).

**Study Population:** A random sample of Walgreens pharmacists nationwide were surveyed. Pharmacists at each of the 254 Walgreens stores in Ohio received the survey.

**Study Period:** The pharmacist survey was distributed electronically on August 8, 2018. Survey responses were accepted between August 9-20, 2018.

**Statistical Analyses:** Student’s t-tests were utilized to compare descriptive statistics between intervention and control stores. The method of least squares was used to assess general linear model for continuous measures and difference in means. Pearson chi-squared statistics were assessed for categorical measures.

Ohio Area Agencies on Aging

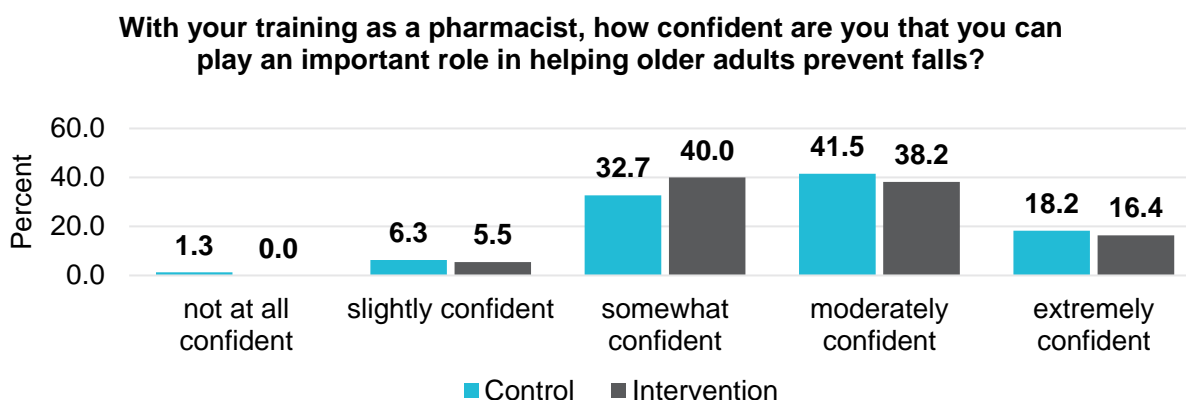


## RESULTS

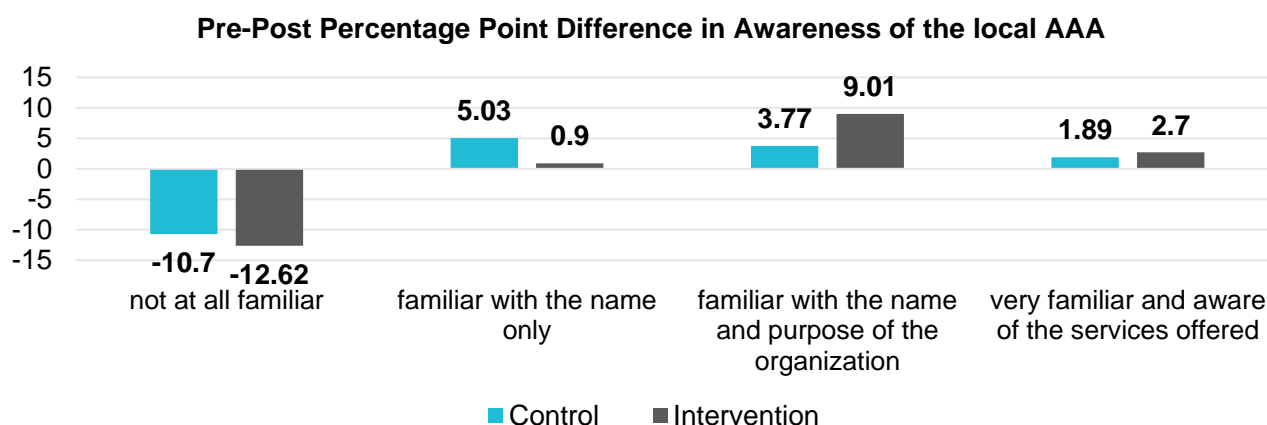
Response rates were 41% (N=111) and 59% (N=160) in Ohio and non-Ohio states, respectively. We estimate that pharmacists discussed fall prevention with an additional 57,642 patients chain-wide on 8/7/2018. The difference in older patients counseled on fall prevention on 8/7/2018 vs. a typical day was significantly greater ( $p=0.03$ ) for Ohio pharmacists ( $\mu=9.28$ ) compared to non-Ohio pharmacists ( $\mu=5.94$ ).

| Table 1: The number of older adults who spoke with a pharmacist about fall risk and prevention | Intervention (Ohio stores) | Control      | P-value |
|--|----------------------------|--------------|---------|
| On Senior Day (SD)   | 10.14 (12.51)              | 6.80 (10.98) | 0.0216  |
| Prior to Senior Day – Daily (SD)   | 0.86 (5.81)                | 0.86 (1.93)  | 0.9972  |
| Difference in number of patients on Senior Day vs daily baseline (SD)                          | 9.28 (14.16)               | 5.94 (10.30) | 0.0305  |

The majority of pharmacists in Ohio and non-Ohio states were moderately or extremely confident in their ability to discuss fall prevention with older patients (69.82% vs. 72.72%) and play an important role in fall prevention (59.75% vs. 54.54%).



Awareness of the local AAAs did not differ between groups before (pre) Senior Day ( $p=0.5977$ ) or after (post) Senior Day ( $p=0.3079$ ). When the pre/post percent point difference was calculated, the difference in means was significantly greater in the intervention group under  $p<0.1$  criteria (0.34 vs 0.22,  $p=0.0764$ ).



## CONCLUSIONS

This study demonstrates the feasibility of utilizing community pharmacists, in partnership with AAAs, to reach large numbers of older adults to counsel on fall prevention. Pharmacists are well-positioned to counsel older adults on fall risk and prevention, although there is a continued need to educate pharmacists on the purpose and programming of local AAAs and the availability of fall prevention programs.

### References: (Endnote Reference Style)

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