TITLE: Chair or Bed Alarms for the Reduction of Falls in Long-Term Care: Clinical Effectiveness and Guidelines

DATE: 15 October 2014

RESEARCH QUESTIONS

1. What is the clinical effectiveness of chair or bed alarms for the reduction of falls in patients in long-term care?
2. What are the evidence-based guidelines regarding the use of chair or bed alarms for patients in long-term care?

KEY FINDINGS

One evidence-based guideline was identified regarding the use of chair or bed alarms in long-term care.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library (2014, Issue 10), University of York Centre for Reviews and Dissemination (CRD) databases, CINAHL, ECRI (Health Devices Gold), Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2009 and October 8, 2014. Internet links were provided, where available.

SELECTION CRITERIA

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

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Table 1: Selection Criteria

<table>
<thead>
<tr>
<th>Population</th>
<th>Patients living in long-term care facilities (with or without dementia)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention</td>
<td>Chair or bed alarms</td>
</tr>
<tr>
<td>Comparator</td>
<td>No comparator or compared to other fall prevention strategies</td>
</tr>
<tr>
<td>Outcomes</td>
<td>Reduction of fall risk, safety, guidelines and best-practice for use</td>
</tr>
<tr>
<td>Study Designs</td>
<td>Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, evidence-based guidelines</td>
</tr>
</tbody>
</table>

RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

One evidence-based guideline was identified regarding the use of chair or bed alarms in long-term care. No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, or non-randomized studies were identified.

Additional references of potential interest are provided in the appendix.

**Health Technology Assessments**
No literature identified.

**Systematic Reviews and Meta-analyses**
No literature identified.

**Randomized Controlled Trials**
No literature identified.

**Non-Randomized Studies**
No literature identified.

**Guidelines and Recommendations**

   See: Step 9

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APPENDIX – FURTHER INFORMATION:

Systematic Reviews – Other Settings


See: Table 5: Fall-Prevention Interventions in Acute-Care Settings, page 22


Randomized Controlled Trials – In-Hospital


Non-Randomized Studies

Alternate Outcomes


Other Settings


Clinical Practice Guidelines


17. Preventing falls and harm from falls in older people: best practice guidelines for Australian residential aged care facilities [Internet]. Sydney: Australian Commission on Safety and
See: 14.3.1 page 91 and 15.2.4 page 96

Review

See: Bed and Chair Alarms, page 15