



# Health and Social Services



## Preventive Home visits

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Participating partners:  
Bodö Norway and Faroe Islands



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## Background

Old people want to be independent and live in their own homes as long as possible. It is important for elderly to get information about what services the community can offer to contribute them to stay at home as long as they like. Preventive home visits to elderly, made by staffs with social and medical competence, can improve them to manage their daily life better. C-G Sahlén, 2009 university of Umeå shows in his research ["An ounce of prevention is worth a pound of cure"](#) that preventive home visits are a useful method to protect health among elderly. Research from the economists H Bergland and T Gressnes, 2010 university of Harstad shows that every year about 7000 to 9000 hip fractures occurs in Norway, which get total costs between 1,1 to 1,5 billion NOK. On this basis there is much money to save for the community and to prevent suffering among elderly.

## Present situation

In Bodö Norway and Luleå Sweden preventive home visits are made to elderly at the age of eighty. In Bodö it is the nurse at the elderly health center who performs the visits and in Luleå by a branch head in the home help care services in the municipality. The visits in both countries are made to elderly who doesn't have any help from the social care services. A question guide is used during the visits and an information folder with brochures and useful information is lend over and gone through. In Bodö the visits are documented in Geric, in Luleå there is no documentation because of the law.

## Projectwork

In the OLE 2 project the municipality and the County Council in Luleå Sweden cooperated and tried a common model for preventive home visits. The visits were repeated and performed as the model presented below. In Bodö Norway the visits were performed as earlier, some got at repeated visit.

## Evaluation

In Luleå the elderly who received the visits were positive and found the visits valuable, the information folder was appreciated and they expressed an increased knowledge about what services is available for elderly. Some express that they want a yearly visit while some other want to take contact by their own if they need help whit anything. The experiences from Bodö are similar. The visitors find out that many elderly have a good health and manage their daily life well.

## How to perform preventive home visit:

Find the elderly that will be eighty the actual year in the population register. Offer elderly without help from the home help care services a visit. If the chiefdom is shared it's desirable that the visit are planned and performed in cooperation between the head principals.



1. Send a letter with an offer of a home visit with a proposed time for the visit or tell that you make a telephone call within a week to set up a time for the visit.
2. Present the background for the visit.
3. Get acceptance for the visit by creating a good relation.
4. Observe the home in purpose to identify possible risks in the environment. Is fire alarm installed? Are there any loose carpets? How is the lightning? How is the furniture?
5. Use a questionnaire or a question guidance to get an overall picture of health and well-being.
6. Use standardized risk assessment tools to identify malnutrition as [MNA](#) and fall risk [DFRI](#). (See [guide MNA](#) and an [article about fall prevention](#)).
7. Lend over and go through an information folder with useful information about telephone numbers and brochures about different kind of services for elderly, brochures about safety in daily life.
8. Offer/perform the visit once a year from the year of eighty.
9. Document the visit if the law allows it, it can differ between the countries.

#### Content information folder:

The information folder in Luleå contains brochures and information about:

- Meeting place for elderly
- Emergency medical alarm
- Support to relatives
- Security in daily life
- The sun room and spa
- Activity center
- Training suggestions
- Wake up gymnastics
- Shoe suggestions
- Food for elderly
- Services for elderly
- Telephone numbers to health center, pharmacy, health insurance office, library, church, aid shop, administrators in the municipality, mobility service, dementia team

The information folder in Bodö contains information about:

- Telephone number to health center, hearing/view contact, emergency, Red cross visiting service, helpline mental help, concern phone for elderly, fitness activity
- Activity center
- Municipal activity program
- Services for elderly
- Strength and balance training
- Food for elderly
- Security in daily life



## Template for a letter to elderly in Luleå

The municipality of Luleå and the County Council offer a home visit to elderly who will be eighty this year. The visits are made in cooperation and the purpose is to promote elderly health by preventive work.

During the home visits we will talk about your daily life, health, housing or what you think is important for you. You have the opportunity to get information about activities and services available for elderly.

The visits are performed by a district nurse from the health center and the branch head for the staffs in the home help care services.

We will get in touch with by telephone within a week to set up a time for when the visit can be performed. The visit is free for charge, voluntarily and we have confidentiality.

District nurse  
head

Branch

.....  
Phone:

.....  
Phone:



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## Template for a letter to elderly in Bodö

The visit is planned xxxx-xx-xx

### **"We want to support seniors to live an independent life"**

We offer you a conversation about important issues relating to your health and daily life. We provide guidance and useful information for elderly

We help you to find out how you can get in contact with the various agencies in the municipality.

**The offer is voluntary and free. The visit lasts approximately 1 hour. We have a duty of confidentiality.**

If you prefer to come to the health center, you can call us on telephone:  
**+47 7555440 Tuesday and Thursday between 8:30 a.m. to 15:30 p.m.**

If you **don't want** to have this visit or you don't find the time convenient, please call us on the same phone.

We look forward to meet **you!**

Sincerely  
Elderly Health Services  
Moloveien 20



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<b>Activity ability</b>
29. Is it easy to move inside? Aid?
30. Do you go outside by your own? If no, why not?
31. If yes, is it easy to move outside? Aid?
32. How is your balance? If bad, have you fallen at any time?                      How many times?
33. Do you make any easier exercise as walking, work in the garden, housekeeping or snow shovelling? (At last 30 minutes to get warm)
<b>DFRI-enclosure</b>

<b>State of health/Medication</b>
34. How do you grade your state of health?
35. If bad, in what way?
36. What do you do to keep healthy?
37. Do you feel tired? 37a If yes, does it affect your daily life and in what way?
38. Do you feel depressed? 38a. If yes, does it affect your daily life and in what way??
39. Do you sleep well? 39a. If no, why not?
40. Do you feel anxiety? 40a. If yes, does it affect your daily life and in what way?
41. Do you suffer from pain? 41a. If yes, does it affect your daily life and in what way?
42. What do you do when you get ill??
43. Do you usually take influenza vaccination?
44. Do you use any medicines? 44a. If yes, is it easy to remember when to take the medication? Aid for medication?
45. If medicine. Have you got information about the medicine? Do you know how/when to take the medicine and what effects it has?
46. Do you use any alternative medicine i.e. nature based medicine? 46a. If yes, does your doctor know that you take them?
47. Have you recognized if it's hard to find the words when you want to express yourself?
48. Do you experience that your memory has become worse?
49. Do you participate in activities or are you active in any association?
50. Do you have knowledge of what activities elderly can participate in?
51. Do you use to visit anyone? 51a. Does someone visit you?
52. Is it anything you miss in your daily life? If yes, what?
53. Do you feel secure in your life? If not, why?
54. Are you in touch with your relatives?
55. Who do you turn to if you feel alone?

How satisfied are you with your life?

Not at all 0—1—2—3—4—5—6—7—8—9—10 Totally satisfied



### Downton fall risk index

<b>Known previous falls</b>	<b>Score</b>
No	0
Yes	1
<b>Medications</b>	
Non	0
Tranquillizers/sedatives	1
Diuretics	1
Antihypertensive (other than diuretics)	1
Antiparkinsonian drugs	1
Antidepressants	1
Other medications	0
<b>Sensory deficits</b>	
Non	0
Visual impairment	1
Hearing impairment	1
Limb impairment	1
<b>Mental state</b>	
Oriented	0
Confused (cognitively impaired)	1
<b>Walking Ability</b>	
Normal (safe without walking aids)	0
Safe with walking aids	0
Unsafe (with/without walking aids)	1
Unable	0

Item scores are added together to an index total, range 0-11, where 3 or more is taken to indicate a high risk of falls (Downton,1993).