

PREVENTING FALLS AND FRACTURES

SELF-HELP CLASS



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Description

- ▶ Basic 1 hour group class
- ▶ Includes risk factors, self-assessment, home checklist, preventative interventions and instructions on reporting falls.

Patient Objectives

- ▶ Increase awareness of risk factors
- ▶ Assess personal level of risk
- ▶ Increase knowledge of risk reducing behaviors
- ▶ Decrease incidence of falls

System Objectives

- ▶ Identify patients at risk
- ▶ Increase risk reducing behaviors
- ▶ Refer high risk patients for appropriate follow-up
- ▶ Decrease incidence of falls

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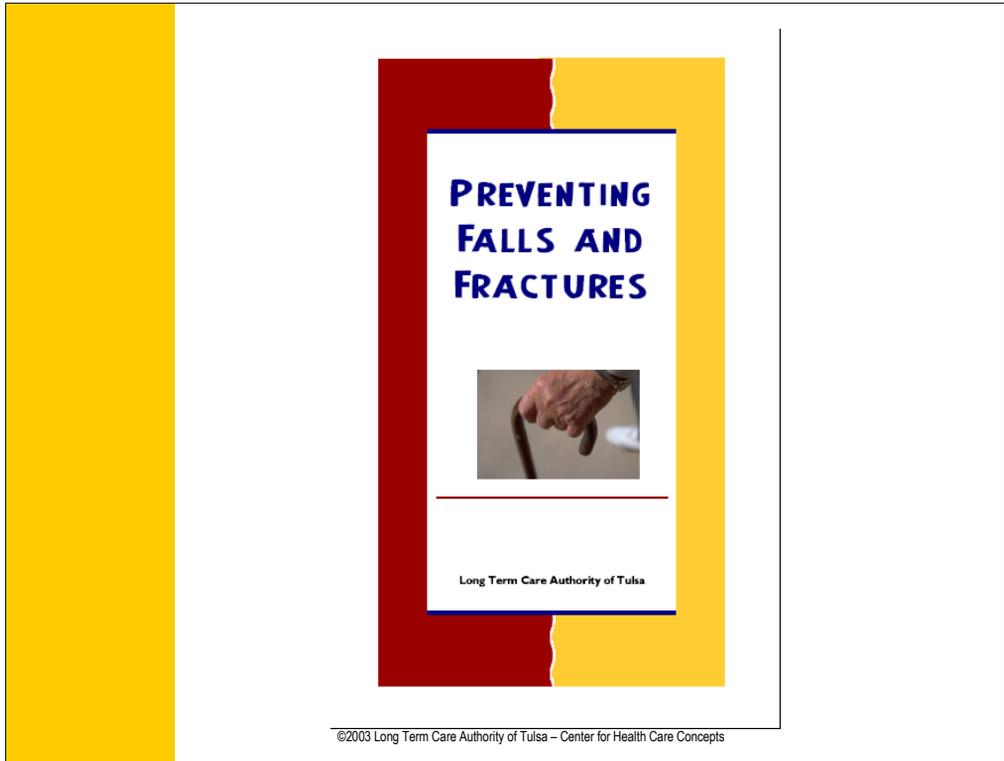
Supplies

- ▶ Name tags
- ▶ Marker board or pad and easel
- ▶ Markers
- ▶ Overhead projector
- ▶ Patient packets

Teaching Instructions

- ▶ Suggested script provided as a guide
- ▶ Teaching tips appear in parenthesis
- ▶ Please ask participants to complete a satisfaction survey at the end of class
- ▶ Please complete and send to case manager:
 - Class roster
 - Patient report
 - Self-test

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(Welcome each participant as they enter and assist with name tag. Be sure their name is entered correctly on the class roster. Give each participant a patient packet.)

(Welcome participants. Briefly explain the purpose of the class. Ask participants what they want to get from class and scribe answers on a board or large pad. Explain that you will return to their answers at the end of class to make sure all concerns were addressed.)

MORE THAN JUST A TUMBLE. . .

- ▶ **6th leading cause of death for > 65**
- ▶ **20% of all hospitalizations**
- ▶ **Of those admitted to hospitals, 50% will not be alive in 1 year**
- ▶ **1/2 who are injured will be discharged to a nursing home**
- ▶ **Among those who are independent at the time of fracture, 25% are still in nursing homes 1 year later**

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(Review slide)

We used to think that falls were always “the fault” of the person who falls. We now know that there are often many factors that put folks at risk for falling. We know that when certain factors are present, the risk of falling increases and may even be predictable. We also know there are many things you can do to reduce your risk for falling.

RISK FACTORS

- ▶ **Fallen before**
- ▶ **Fear of Falling**
- ▶ **Problems with walking and balance**
- ▶ **Improper use of walkers and canes**
- ▶ **Leg weakness**
- ▶ **Hazards at home**
- ▶ **Certain medicines**
- ▶ **Health factors**

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These are the most important risk factors associated with falls.

(Review the slide)

(Ask if anyone has experienced a fall, near fall and or injury from falling. Explore how it made them feel and if the fall caused any changes in activities of daily living.)

The more risk factors you have, the greater your risk for falling. Certain risk factors paired together are especially troubling. For example, if you have fallen before and you have problems with balance and gait, it is 100% certain you will fall again unless you get some help. Having fallen before also tends to increase your fear of falling and often causes you to be overly cautious, less active and more apt to fall again.

HEALTH FACTORS

- ▶ **Vision Problems**
- ▶ **Hearing problems**
- ▶ **Medicines**
- ▶ **Problems with bones, joints and muscles – osteoporosis, arthritis, back trouble, post-polio, foot disorders, Parkinson's**
- ▶ **Heart disease and stroke**
- ▶ **Dizziness – inner ear, anemia, low BP**
- ▶ **Leaking urine, especially at night**
- ▶ **Dementias**

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There are many health factors that increase your risk for falls:

Vision problems. Cataracts, macular degeneration, reduced ability to see near and or far and not uncommon as we age. All can prevent us from noticing hazards. Some vision problems also make it difficult to see depth, as with a step; or turn busy patterns into a scary maze of confusing shapes. Not seeing well can make us unsure on our feet and disoriented.

Hearing problems. Being unable to hear warnings, being confused when unable to determine exactly what a noise is or where it is coming from, being startled when someone you didn't hear someone approach.

Medicines. Taking lots of different medicines can increase the possibility of drug interactions and side effects. Certain medicines can cause dizziness, drowsiness, weakness and/or confusion.

Problems with bones, joints. . . These affect the way we move, cause shifts in our center of gravity, or throw off our balance.

Heart disease and stroke. Weakness, shortness of breath, paralysis and poor circulation are common.

Dizziness. Causes instability and loss of ability to remain upright.

Leaking urine. Causes folks to rush to the bathroom, wet spots on floors, inactivity, and isolation. Urinary frequency, especially at night, also increases risk.

Dementia. Mental confusion causes disorientation, fear, reactive movements, and loss of ability to perceive hazards.

ARE YOU AT RISK?

- ▶ **Self-test**
- ▶ **Home check**

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The first step in protecting yourself from falls is recognizing the risk factors that apply to you.

Take a moment to complete the self-test in your packet. The more items you mark or answer as “Y”, the greater your risk.

(Use the self-test as a guide for discussion. Ask if anyone was surprised that an answer they gave increased their risk.)

Many falls happen at home. A little later, we will talk about specific safety checks you can do in every room of your home.

WHAT YOU CAN DO



- ▶ **Medical Checkups**
 - ▶ **Exercise**
 - ▶ **Home Safety**
 - ▶ **Common Sense**
-

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The good news is that many risk factors can be corrected or compensated for and you can reduce your risk.

We will spend the next several minutes talking about each one of these in detail. Be sure to ask any questions as we go along.

MEDICAL CHECKUPS

- ▶ Chronic diseases
- ▶ Acute illness
- ▶ Vision check
- ▶ Hearing check
- ▶ Medications
- ▶ Assistive devices – canes, walkers, wheelchairs



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Medical checkups – Share your self-test results with your doctor. If you have been putting off getting treatment for a medical condition, now is a good time. Be sure and get your vision and hearing checked annually, or more often if you notice changes. Talk to your doctor about your medicines, especially if you are taking more than four different kinds or you are taking medicine for sleep, depression, tension or pain. Lots of medicines can cause drowsiness and confusion. Always report these effects to your doctor. If you are taking a water pill near bedtime and it causes you to go to the bathroom during the night, ask your doctor if you can take it in the morning or during the day. Finally, never take an over the counter or herbal medicine without checking with your doctor first. Many of these products can be harmful to people with certain medical conditions or when mixed with certain prescription medications.

If your doctor recommends an assistive device, like a cane or walker, be sure to get properly fitted and trained. Using the wrong equipment or using it the wrong way can increase your change of falling.

EXERCISE



- ▶ General fitness
- ▶ Strength training
- ▶ Flexibility
- ▶ Tai Chi
- ▶ Physical Therapy

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Exercise is a great way to help reduce your risk for falling. It helps keep your bones, muscles and joints strong and flexible. Exercise also improves circulation, boosts your self confidence and helps fight depression. Tai Chi has been proven to improve balance and coordination. Your doctor may even recommend physical therapy to help with gait and balance problems. Ask your doctor to help you plan the right exercise routine for you.

HOME SAFETY

Lighting

- ▶ 4100-200 watt bulbs
- ▶ 4Reduce glare – halogen or fluorescent bulbs, lamp shades, polarized glass
- ▶ 4Light pathways and stairwells w both ends
- ▶ 4Bedside lamp
- ▶ 4Night lights, flashlights



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If you are like most people, you probably feel the safest at home. You may feel like you've lived with that ceramic tile floor or a throw rug or two for many years without ever falling. In other words, it won't happen to you. In fact, most falls do happen at home. Most fall hazards around the house are dangerous for people of all ages but as we get older, the risk increases. We may not pick up our feet the way we used to, we don't see quite as well, illness may slow us down, we can't "catch" ourselves as quickly, etc. Making sure your home is safe as it can be is one of the most important things you can do to protect yourself from falling. So, let's go through the home safety checklist and I'll bet you'll recognize some trouble spots.

(Review each item on the home safety slides. Solicit comments and questions. Most folks will recognize trouble spots. Encourage them to talk about what they need to do.)

HOME SAFETY

Flooring

- ▶ Avoid highly polished surfaces such as glazed tiles and smooth vinyl
- ▶ Carpet should be low pile and tightly woven in a solid color that contrasts with walls
- ▶ No loose edges on any flooring
- ▶ No throws or area rugs



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HOME SAFETY

All living areas

- ▶ Free of clutter
- ▶ Pathways free of cords
- ▶ Storage areas easily reached without tip-toeing or climbing
- ▶ Sturdy step stools with handles and slip resistant tread
- ▶ Thresholds do not present trip hazard
- ▶ Rails on both sides of all stairs and steps

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HOME SAFETY

Furniture

- ▶ Out of pathways
- ▶ Couches and chairs easy to get in and out of
- ▶ Chairs have armrests
- ▶ Chairs do not have wheels
- ▶ Avoid pedestal tables



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HOME SAFETY

Bathrooms

- ▶ Grab bars
- ▶ Elevated toilet seat or safety frame
- ▶ Non-skid mats, abrasive strips or carpet on all surfaces that can get wet
- ▶ Shower chair



Bedrooms

- ▶ Bed side lamp
- ▶ Bed side telephone
- ▶ Bed height so that both feet are firmly planted when seated on the edge
- ▶ Wheels removed or locked
- ▶ Clear pathway to bathroom

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HOME SAFETY

Outside

- ▶ Lighted pathways and steps
- ▶ Doorways, porches, walkways, steps, and railings in good repair and free of plants and debris
- ▶ Ladders used safely (or better yet, not at all)
- ▶ Non-skid surfacing in areas that could get wet

General Tips

- ▶ Sturdy non-slip shoes or slippers
- ▶ Frequently used items at waist level
- ▶ Reachers or grabbers to get things above your head
- ▶ Limit alcohol

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I would like to encourage each of you to use these home safety pages as a checklist. Sit in the middle of each room, start with one wall and do a floor to ceiling check. Then repeat the process for each wall and each room. Be sure to make notes. Remember, just because it has never been a problem before, doesn't mean it can't trip you in the future, literally. Try hard to avoid the trap of believing that it will never happen to you.

You may find yourself wondering how you will be able to make necessary improvements. Family and friends are always looking for good gift ideas and meaningful ways to help. How about suggesting items or projects to help make you safer?

COMMON SENSE

- ▶ Follow medical advice
- ▶ Avoid slippery surfaces
- ▶ Do not climb
- ▶ Get up slowly
- ▶ Keep nighttime temperatures in the home above 65 degrees
- ▶ Carry a cordless telephone
- ▶ Never move about the house in the dark
- ▶ If you live alone, consider Lifeline

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These are some common sense tips that may seem kind of simple, but I know a lot of folks who have fallen because they didn't use good common sense at the time.

Follow medical advice. Take good care of your health. If you are having trouble following your doctor's advice, talk to him/her about it so you both can come up with a plan you can live with.

Avoid slippery surfaces. How many of you know someone who slipped and fell on the ice? They didn't think it would happen to them, but it did.

Do not climb. Here's another one. Cabinets, counter tops, shelves, chairs and ladders are the "trees" for adults. Sound familiar?

Get up slowly. How many of you have felt almost faint after getting up too fast? It is called postural hypotension. When you change positions too quickly, the blood rushes from your brain faster than your heart can pump it back in. The problem tends to get worse as you get older because of slower circulation and sometimes because of certain medicines. Take a few seconds to let your body adjust to changes in position. It's especially important when you are getting out of bed. Start by sitting up and letting your feet dangle to the floor before standing. Once you stand, wait a bit before taking a step.

Keep nighttime temps above 65°. Prolonged exposure to cold temps can cause a drop in body temp and lead to dizziness and falling.

Lifeline. Lifeline gives you instant access to help. If you live alone, it can give you an extra sense of security.

IF YOU FALL . . .

- ▶ Call 911 if you suspect serious injury
- ▶ Report ALL falls to your doctor:



SPLATT

Symptoms at the time of fall
Previous number of falls or near falls
Location of fall
Activity engaged in at time of the fall
Time of the fall
Trauma from the fall

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If you fall and think you have a serious injury, call 911. If you fall but you are not sure if you hurt yourself, call your doctor. ALL falls should be reported to your doctor. You may think you were “just clumsy”, but most falls are really due to a number of factors. It is important to get to the bottom of the reason of a fall in order to prevent it from happening again. SPLATT is a helpful guide when reporting falls. (Review the slide).

SUMMARY

- ▶ **Know your risk factors**
- ▶ **Do a home safety check**
- ▶ **Get medical check-ups and follow your doctor's advice**
- ▶ **Exercise**
- ▶ **Use common sense**
- ▶ **Report ALL falls, SPLATT**
- ▶ **Consider Lifeline**

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(Review the slide. Ask if there are any questions. Return to the board or pad where you listed the participant's concerns at the beginning of class. Make sure all concerns are addressed.

Ask participants to complete an evaluation form and thank everyone for coming. Send a copy of the registration sheet, self-test, patient report and compiled results from evaluations to the case manager.)