Community Falls Prevention
Orientation
Falls Prevention is everyone's business
What is a fall?

- **A fall** is an event which results in a person inadvertently coming to rest on the ground, the floor or other lower level.
- This can be from standing, bed or chair.
Falls Facts

- In the community 1 in 3 people over the age of 65 will have a fall per year.
- This increases to 1 in 2 for people 80+.
- The risk of falls is greater for women than men.
Falls Facts

- Falls are the leading cause of injury deaths and hospital admissions for persons 65 years and older.

- Serious injury occurs in 10% of falls.

- 25% of those who fracture a hip will die within six months of the injury.
Falls Facts

- Once someone has had a fall, they are very likely to fall again.
- 66% of persons who fall will experience another fall within six months.
Falls Facts

- 50 - 60% of Hostel residents will have a fall per year
- Nursing Homes: falls rates range from 30 – 60% per year
- 15% of older people fall within 1 month of discharge from hospital
Falls Facts

- Most falls occur in the home
- Even one fall can lead to loss of confidence.
- A serious fall is often the precipitating event leading to residential care:
  - 50% of older people who sustain a fall-related injury will be discharged to a nursing home rather than return home.
Falls Facts

- Falls affect ongoing quality of life as they can lead to restrictions in activity and social isolation.

- Approximately 25% of community-dwelling people 75 or over unnecessarily restrict their activities because of fear of falling.
Where falls occur in the community

- 67% of falls occur in person’s own home
  - 40% inside the home
  - 26% in the yard

- 28% in a public place

- 4% in someone else's home or yard

Reference: NSW Falls Prevention Baseline Survey 2009 Report
NSW Health, 2010
Where falls occur in the home

- 54% in living areas, hallways, and the bedroom.
- 10-12% in bathrooms, kitchens, laundry and toilets.
- Stairs 9%
Where falls occur in the yard

- 57% garden
- 15% driveway
- 12% verandah
- 6% garage/shed
- 3% roof/tree
Where falls occur in public places

- 28% in public places
- 40% footpaths
- 22% service/trade/public buildings
- 14% roadways and parking areas
- 10% open space
- 7% sports areas
- 4% public transport areas
Reported activity at time of fall

- 44% walking
- 17% physical work/chores
- 16% carrying /bending
- 11% steps/kerbs
- 6% hurrying
- 5% self care
- 5% physical activity/exercise
LOCATION OF FALLS

Source: Victorian Injury Surveillance System
Why older people fall?
Risk factors for falls

- Risk factors are usually divided into:
  - **Internal/Intrinsic:** those that are particular to the person such as poor balance, chronic condition, poor vision.
  - **External/Extrinsic:** Environmental and hazards both in and out of the home
Common risk factors for falls

- Previous fall
- Poor mental state
- Unsafe mobility
- Visual impairment
- Incontinence
- Medications
- Home hazards
- Chronic conditions
- Poor general health - including poor nutrition, and frailty
Falls Prevention: what works

- Balance and strength training
- Tai Chi
- Home based exercise – Otago program NZ, NSCCH ‘Staying Active Staying Safe’
- OT home assessment + falls prevention education in the home
- Reduction in psychotropic medications
- Cataract extraction
What can you do?

- Discuss any identified falls risks with your clients/carers
- Refer clients at risk or who have had a fall to a health professional for a falls assessment eg Community Nurse, Occupational Therapist, GP, Physiotherapist or protocol in your LHD.
What can you do?

- Talk to and educate your care workers/volunteers about the falls risk – get them to report falls to the coordinator

- Provide Falls Prevention information to all clients/carers over 65 – talk to your clients about falls risks factors
What can you do?

- Screen all clients over 65 for falls risk
  - Can be as simple as asking if they have had a fall in the last 12mths
  - Use an evidenced based screening tool - examples found in Best Practice Guidelines for Australian Community Care

- Know what the falls risks are and look for them during home visits
What can you do?

- Encourage clients/carers to participate in exercise programs developed by trained providers eg Tai Chi, Strength and Balance, ‘Stepping On’.
- Provide information on Active Over 50’s, or Healthy Lifestyle classes.
- Implement a ‘Falls Pathway’ for your service
Service providers should ask all clients if they have fallen or nearly fallen in the past year. Observe for balance, impaired mobility, and potential to benefit from interventions.

- No falls
  - Provide education and information on falls risk factors

- Recurrent falls
  - Presents to ED after a fall.

- Single fall
  - Check for gait and balance problems
    - Gait and balance problems
    - No gait and balance problems
      - No obvious problems

FALLS EVALUATION

- Screening/Assessment
  - Multifactorial interventions
    - Follow-up

Simplified Prevention Flowchart
PREVENTING FALLS AND HARM FROM FALLS IN OLDER PEOPLE.

Best Practice Guidelines for Australian Community Care.

Australian Commission on Safety and Quality in Health Care

www.safetyandquality.gov.au

NSW Government

Health
Northern Sydney Local Health District
COMMUNITY FALLS PREVENTION STRATEGIES

FALLS SCREEN – record in client notes
- Identify at risk clients and refer for assessment.

FALLS ASSESSMENT – record in client notes
- Falls risk assessment completed
- Risk Factors identified
- Action plan developed
- Arrange for referral or provide treatment of risks.

FALLS PREVENTION STRATEGIES

BALANCE AND MOBILITY
- Assess balance, mobility and strength.
- Refer to physiotherapist if available.
- Recommend mobility aids for those with poor balance and mobility.
- Encourage exercise that includes challenge to balance.

FEET AND FOOTWEAR
- Check for ill-fitting shoes, inappropriate footwear, foot pain and other problems.
- Provide education and information on correct footwear.
- May need referral to Podiatrist for detailed assessment and care of feet.

CONTINENCE
- Assess for causes of incontinence and implement strategies.
- Reduce caffeine and carbonated drinks.
- Minimise environmental risk factors:
  - Pathway to toilet free of clutter.
  - Leave a low wattage light on in the toilet.
  - Grab rails installed.
- Continence aids may be needed.
- Refer to Continence Advisor.

VISION
- Regular eye test, every 2 years.
- Check for signs of visual changes (inability to see details, bumps into object).
- Referral to an optometrist for eye disease if possible.
- People with cataracts should have surgery as practicable.
- Consider single vision lenses, for people in regular outdoor activities.
- Home safety check for people with severe visual impairment.

ENVIRONMENT
- OT Home safety check for people at high falls risk.
- Assess the older person in the home environment and use a Home Safety Checklist.
- Ensure adequate lighting and use of night lights.
- Remove clutter and modify slippery floors or steps/mark step edges.
- Install grab rails.

EXERCISE
- Encourage balance and strength exercises:
  - Home based exercise.
  - Group based exercise.
  - Tai Chi.
  - Stepping On’ programs.

COGNITION
- People with cognitive impairment have increased risk of a fall.
- Assess any changes in cognition: screen for delirium and treat causes.
- Assess for dementia and treat possible medical conditions.

MEDICATION
- Regular review of medications by GP or local pharmacist.
- Limited drug use and gradual and supervised removal of psychoactive medication where possible.

OSTEOPOROSIS / DIET
- Encourage high calcium foods in diet.
- Consider Vitamin D and Calcium supplementation and liaison with GP.
- People with recurrent falls should have bone health checked.
People with minimal – trauma fracture should be assessed for falls risk, bone health and supplementation.

SYNCOPE / DIZZINESS
- Unexplained falls or collapse, refer to GP for assessment.
- Refer to Physio, GP or specialist to check vestibular function.

Ref: The Australian Commission on Safety and Quality in Health Care, Preventing Falls and Harm from Falls in Older People: Best Practice Guidelines for Community Care, 2009. Version 1: Sept 2010
Northern Sydney and Central Coast LHD Resources.

Choose the Right Shoes

Don’t go head over heels!

Don’t fall for it! (at Home)

- Keep physically active
- Have regular health checks eg. eyesight, hearing and feet
- Review your medications with your doctor & pharmacist
- Wear well-fitting shoes and slippers with non-slip soles
- Keep your home free from hazards
- Use the correct walking aid for your needs
- Be aware of falls hazards when out and about

Prevent a Fall at Home

- Make your home safer by removing clutter and checking for hazards
- Have bright lighting – use maximum recommended wattage in all lights
- Install a nightlight in your bedroom or hallway
- Have hand rails installed on your stairs
- Consider installation of hand rails and shower aids in your bathroom
- Wear well-fitting shoes or slippers, with a non-slip sole
- Use the correct walking aid for your needs
- Review your medications with your Doctor & Pharmacist
- Have regular health checks eg. eyesight, hearing and feet
- Manage chronic health conditions to reduce risk of a fall
- Do regular exercise to maintain balance and muscle strength

Fridge Magnet

NSW Government
Northern Sydney Local Health District

Safe Shoe Brochure

Bookmark
Northern Sydney and Central Coast LHD Resources ordered from:

HEALTHY LIFESTYLE
02 8877 5327
clawrenson@nsccahs.health.nsw.gov.au
Website
www.activeandhealthy.nsw.gov.au

A State wide consumer and professional resource for
- **Falls Prevention Exercise Programs** in your local area
- **Staying Active and On Your Feet** publication
- Simple and essential **Home Based Exercises**
- **Health and Lifestyle** tips and checklist
- **A Home Safety Checklist**
LHD Physical Activity Options

- CCLHD Active over 50 - Central Coast
  - Ph: 4349 4800

- Healthy Lifestyle Courses- NSLHD
  - Ph: 8877 5300
Examples of Falls Prevention Exercise Programs

- Community Based Classes:
  - Tai Chi, Strength and Balance;
  - Gentle Exercise, Dance, ‘HeartMoves’;
  - Yoga, Qui Gong, Pilates.
  - ‘Stepping On’: falls education + exercise program.

- To find community classes close to you visit:
  www.activeandhealthy.nsw.gov.au

- Home Based Exercises:
  - please also see www.activeandhealthy.nsw.gov.au
The 'Stepping On' program is a free falls prevention group program for community dwelling people 65+ who have had a fall or are fearful of falling:

- The program consists of seven weekly 2 hour group sessions, with a booster session 3 months after completion.
- Participants must be able to walk independently or with a walking stick and the program is not generally suitable for people with dementia or neuromuscular conditions.
- For NS & CC LHD classes:
- Nadia Williams Ph: 9808 9685

www.activeandhealthy.nsw.gov.au
‘Staying Active and on your feet’
-resource booklet

Health Professionals and consumers are able to order this resource on-line:

www.activeandhealthy.com.au
Clinical Excellence Commission – Falls Prevention Program.

NSW Falls Prevention Network.

- NSW Falls Prevention Network list serve
- Regular newsletters and information updates
- Annual Network Seminar

http://fallsnetwork.neura.edu.au
Falls Prevention is everyone's business