

# Fall Prevention

## Care Provider Bulletin

Sept. 2018



### People at High Risk of Falls

- Are not active and do not move around much
- Use canes or walkers
- Are unsteady and need walking support
- Have fallen before
- Have visual impairments
- Are diagnosed with a seizure disorder
- Take medication(s)

### Preventing Falls

- Balance and strength training can help prevent falls. Encourage individuals to talk to their doctors to see if an exercise program or physical therapy is a good idea. Look into programs designed specifically for fall prevention like tai chi or Sit and Be Fit.
- Make sure the individual you support has regular vision checks. Poor/low vision increases the risk of falling.
- Have the supported person's feet and shoes checked. Foot problems and poor-fitting shoes contribute to falls. Easy-to-slip-on shoes can also contribute to slips and falls.
- Work with the individual to review home safety:
  - Are pathways obstruction-free?
  - Are table legs or furniture pieces placed in such a way that they might cause someone to trip?
  - Are grab bars needed in the bathroom next to the toilet and in the bathing area?
  - Is a shower chair or hand-held shower needed?
  - Is there enough lighting, especially at the top and bottom of stairs?
  - Are handrails on all stairs?
  - Are rugs tripping hazards?
  - Do any chairs roll on casters that could be a fall hazard?
- Report any medication side-effects to a doctor, especially if symptoms increase the risk for a fall.
- Look into local fall prevention programs (Area Agency on Aging, State Falls Prevention Coalitions, senior centers, health clinics).



### Did You Know?

- Most falls are preventable
- For individuals with disabilities and older adults, unexpected falls can result in serious, costly injuries such as hip fractures, broken bones, and head injuries
- Some medications can cause dizziness, sleepiness, or dehydration - leading to falls
- People who fall once are likely to fall again
- Most falls happen at home

## When a Fall Occurs

- Check the person for injuries.
- Ask the person if they are in pain or feeling dizzy. If the person appears to be injured, encourage them to stay still and call 911. Stay with the person and apply first aid if necessary, including the recovery position if safely possible.
- If the person appears not injured, ask them if they would like to get up. Encourage them to get up slowly. It may be easier if the person gets onto all fours, and then steadies themselves with help. Tell the person to move slowly in case of an injury they may not be aware of. Continue to monitor for signs of pain, bruising or swelling.
- Recheck within 4-8 hours for bruising, swelling, pain or confusion. If the person lives alone, several rechecks may be needed.
- Follow up with the person's doctor to determine what may be causing them to fall and to see what recommendations the doctor has.



**Most falls can be prevented.  
Help keep someone safe!**



## Sources & Resources

- **Video: Six Steps to Prevent a Fall**, National Council on Aging, <https://www.ncoa.org/resources/video-6-steps-to-prevent-a-fall/>
- **Check of Safety, A Home Fall Prevention Checklist for Older Adults**, Centers for Disease Control and Prevention, <https://www.cdc.gov/steady/pdf/STEADI-Brochure-CheckForSafety-508.pdf>
- **What You Can Do to Prevent Falls**, Centers for Disease Control and Prevention, <https://www.cdc.gov/steady/pdf/STEADI-Brochure-WhatYouCanDo-508.pdf>
- **Family Caregivers: Protect Your Loved Ones from Falling**, Centers for Disease Control and Prevention, <https://www.cdc.gov/steady/pdf/STEADI-CaregiverBrochure.pdf>
- **Emergencies and First Aid - Recovery Position**, <https://www.health.harvard.edu/staying-healthy/emergencies-and-first-aid-recovery-position>