

**Standing Strong:
Fall Prevention,
Home Safety, and
Disaster Preparedness**

**Satellite Conference and Live Webcast
Wednesday, November 30, 2011
2:00 – 4:00 p.m. Central Time**

**Produced by the Alabama Department of Public Health
Video Communications and Distance Learning Division**

Faculty

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Objectives

- Establish understanding of the seriousness of falls in elderly and disabled citizens
- Describe natural bodily changes that increase susceptibility to falling with age
- Identify potential hazards in the home

Objectives

- Describe how to evaluate and correct unsafe environmental factors
- Outline effective disaster preparedness in home

**Statistical Overview of
Falls Among Older Adults**

- According to the Centers for Disease Control and Prevention (CDC):
 - Each year, 1 in 3 adults age 65 and older will fall
 - Someone who falls once is likely to fall again

**Statistical Overview of
Falls Among Older Adults**

- We have limited capabilities to reverse the causative factors that make some older adults "Frequent Fallers," short of eliminating gravity!

Statistical Overview of Falls Among Older Adults

- Falls are the leading cause of injury death
 - In 2008, over 19,700 older adults died from unintentional fall injuries

Statistical Overview

- More, according to the CDC...
 - Falls are the most common cause of nonfatal injuries and hospital admission for trauma
 - In 2009, 2.2 million nonfatal fall injuries were seen in ERs
 - More than 581,000 were admitted

Statistical Overview

- In current dollars, falls in older adults cost approximately **\$30 BILLION** dollars a year!

Outcomes of Falls

- Repercussions of non-injury falls
 - Fear of falling may lead to:
 - Unnatural guarding and loss of confidence
 - Self-limiting activity and reduced mobility
 - Overall loss of fitness, setting up vicious cycle increasing fall risk!

Outcomes of Falls

- 20 – 30% of falls result in moderate to severe injuries that may end a person's ability to live independently
 - Lacerations and contusions
 - Fractures
 - Spine, hip, forearm, leg, ankle, pelvis, upper arm, wrist, hand
 - Head trauma, with possible brain injury

Physical Facts: Bodily Changes Can Increase Fall Risk

- Chronic neurologic, metabolic, or orthopedic disease
- Decline in sensory acuity
 - Vision and hearing loss
 - Decline in depth perception
 - Decreased sensation in feet or artificial joints

**Physical Facts: Bodily Changes
Can Increase Fall Risk**

- Impaired posture, balance, protective reactions
 - Inability to “right” or catch oneself to stop a fall
- Decreased strength, flexibility, reactive briskness
 - Weakness, tightness, instability, slow responsiveness

**Well-Being
Situations We Can Manage**

- Ill effects of medications
 - Increase with 4 or more
 - Dizziness, nausea, drowsiness, weakness, instability, confusion

**Well-Being
Situations We Can Manage**

- Inadequate hydration, nutrition, activity, and rest
 - Dizziness, infections, weakness, lethargy, instability, poor stamina
- Poor pain management
 - Impaired posture and movement, guardedness, restricted mobility

**Well-Being
Situations We Can Manage**

- Refusal to accept help from people or devices
 - Denial or refusal to acknowledge needs leads to risk taking

**Environmental Elements:
Circumstances that Invite Falls**

- Hazardous home or community environments
 - Extreme clutter with inadequate space for mobility/gait device

**Environmental Elements:
Circumstances that Invite Falls**

- Hoarding: materials, animals or frequently BOTH

**Environmental Elements:
Circumstances that Invite Falls**

- Living obstacles that move unpredictably
 - Grandchildren, pets
- Inadequate plumbing, climate controls, pest management
- Poor lighting
 - May be deliberate due to finances or depression

**Environmental Elements:
Circumstances that Invite Falls**

- Broken down or inadequate furnishings, especially chairs/beds

**Environmental Elements:
Circumstances that Invite Falls**

- Broken appliances, doorbells, door locks, smoke detectors

**Environmental Elements:
Circumstances that Invite Falls**

- Unsafe stairs with inadequate rails, uneven, or broken steps

**Environmental Elements:
Circumstances that Invite Falls**

- Inadequate communication devices
- Isolation
 - Lack of family, friends
- Inadequate caregiver support and contact

Fall Prevention Basics

- Don't keep non-injury falls a secret
 - Let healthcare professionals assist!
- Get vision and hearing tested every 2 years
- Take medications as prescribed
- Bring meds to all MD visits for review

Fall Prevention Basics

- **Ask questions**
 - “Do I still need all of these?”
 - “What are the side effects?”
- **Don't ignore any health problems**
 - **Speak up the instant you have difficulty with walking, daily routines, or functioning**

Fall Prevention Basics

- **Request a home evaluation by a visiting physical or occupational therapist, for home modification recommendations**

Home Safety Basics

- **Clear clutter and rearrange rooms if needed for open, safe access**
- **Lift unsafe throw rugs and provide non-skid mats beneath the others**
- **Replace / raise / lower furniture and beds if needed for safe transfers**
- **Enhance all lighting**
 - **Night lights in bedroom, halls, bathrooms**

Home Safety Basics

- **Install personal safety equipment**
 - **Shower, tub, toilet**

Home Safety Basics

- **Place handrails and contrast edging on stairs for visibility and safety**

Home Safety Basics

- **Use paint or carpet creatively to provide contrast for doorways, room areas, stair landings**

Home Safety Basics

- Consider a wide array of 'talking' gadgets for the visually impaired

Home Safety Basics

- Keep entry doors lit, doorbells active
 - Install intercoms to identify visitors before allowing entry
- Use large button phone or mobile phone made for seniors, programmed
- Install personal emergency alert system

Home Safety Basics

- Stay organized
 - Keep things in easy reach and where they belong, to minimize confusion

Home Safety Basics

- Analyze WHERE and HOW you fall
 - *Stairs too challenging?*
 - Add an outdoor ramp
 - Move main bedroom downstairs
 - *Need a gait device?*
 - Use indoors as well as outside – need for support doesn't change

Home Safety Basics

- *Trip when walking?*
 - Look up and ahead of you in the house
 - Watch ground more closely outside for uneven terrain/obstacles

Home Safety Basics

- *Moving too quickly?*
 - Slow down, increase awareness especially on turns
 - Plan ahead

Home Safety Basics

- **Have smoke detector batteries replaced every time you “Spring forward” and “Fall back” with the time changes**
- **Keep a working fire extinguisher**
- **Check power outlets and look for frayed electrical cords at the same time**

Home Safety Basics

- **Avoid running cords across walkways**
- **Set hot water heater no higher than 120 degrees to avoid burns**
- **Stay off ladders, counters, and rooftops**
 - **You know when this applies to you!**

So Much Free Information Is Available

- **Here’s a great example of public information out there for the “googling”!**
 - <http://www.thiscaringhome.org/index.aspx>

Driving Safety Basics

- **Take a Senior Driving Safety Class**
- **When ramping onto freeway, be at least at minimum legal speed to join traffic**
- **Excessive slow merge or speed = accidents!**

Driving Safety Basics

- **Avoid freeways when possible once your comfort level with speed declines**
- **Stick to local roads, the right lane ideally**
- **Avoid LEFT turns whenever possible**
 - **Learn to go around the block with RIGHT turns**

Driving Safety Basics

- **Surrender car keys for safety of yourself and others when you know, or get feedback, that you’re getting dangerous!**

Habits for Personal Safety

- **Work with your doctor and therapist to establish the best exercise and workout routine to meet your needs**
- **Find activities you enjoy and people to exercise with, 2 to 3 days each week for at least 30 minutes**
- **Strength, balance, endurance, and flexibility are key to quality longevity**

Habits for Personal Safety

- **Stick to a routine as you are able for meals, exercise, favorite activities, and sleep**
- **Try something new**
 - Tai Chi, power walking, bowling, classes of any type

Disaster and Emergency Preparedness for Seniors

- **What constitutes a disaster or emergency?**
 - Can be natural and catastrophic
 - Hurricanes and floods
 - Lightning strikes/thunder storms
 - Tornadoes
 - Fires
 - Earthquakes

Disaster and Emergency Preparedness for Seniors

- Can be man-made
 - Criminal activity
 - Vehicular accidents
 - Terrorism
- Can be personal
 - Medical incidents
 - Falls and injuries

Emergency Preparedness Checklist for Seniors

- **U.S. Department of Health and Human Services and the American Red Cross recommend ALL seniors (at home or in assisted living) have an emergency PLAN and an emergency KIT**
- **Review at regular intervals**
 - Every 6 months

Emergency Preparedness Checklist for Seniors

- **Update information, supplies, medications**
- **Remind family members or caregivers of the plan and whereabouts of the kit**

Emergency Basics: Behind the Scenes and Always Ready!

- Keep a plan brief, simple and have it **IN WRITING**
- Post plan with Advanced Directives in visible location
 - i.e., envelope taped to refrigerator
- Consider personal emergency alert system

Emergency Basics: Behind the Scenes and Always Ready!

- Maintain a charged senior-friendly cell phone with you 100% of the time
- Have phone programmed for 911 and critical family members or other contacts
- Use I.C.E. (In Case of Emergency) in contacts list to apprise EMS of priority relationships

Emergency PLAN: Pre-work Done, No Last-minute Panic!

- Review home to ensure and maintain clear, adequate exit route to safest visible location
- Install ramp for accessible egress if resident is fragile, a fall risk on stairs, or permanently disabled / wheelchair dependent

Emergency PLAN: Pre-work Done, No Last-minute Panic!

- Keep emergency kit nearby for grab-n-go
- Agree with family members on meeting points
 - One just outside the house
 - One outside the neighborhood

Emergency KIT: Keeping What You Need Close at Hand!

- Include cell phone batteries and charger
- Written contacts list with phone numbers and addresses, should cellular sites be down
 - Include MDs, preferred hospital, pharmacy, church

Emergency KIT: Keeping What You Need Close at Hand!

- Written list of medications and doses
- Written list of pets and veterinarian
- Battery powered or hand-crank radio
- Flashlight, fresh batteries
 - Replace every 6 months
- Extra reading glasses or magnifying glass

Emergency Provisions

- Enough water and food to last 3 days
 - Include canned food with can opener
 - Food easily eaten without cooking or significant preparation
 - Items not requiring refrigeration
 - Canned milk

Emergency Provisions

- Adequate supply of medication for 3 days
 - Prescription and non-prescription
 - Include oxygen
 - Include any associated needs
 - Meters, test strips, syringes, disposable catheters, first aid basics

Emergency Provisions

- Small note pad with pencil or pen
- Layered clothing and accessories
 - Jacket, sweater, underclothes, socks, sturdy walking shoes, gloves, hat, light throw or emergency blanket

Final Safety Thoughts

- Consider medical conditions
- Avoid exposure to inclement weather
- Extreme heat, cold, or wind is very hard on those with cardiac, pulmonary and sometimes orthopedic problems
- Remain indoors if snow, ice or significant water covers walkways

Final Safety Thoughts

- Conserving energy when under stress will reduce panic and keep medical issues more stable, especially diabetes
- Control what you can – stay aware!

Do Bears Go in the Woods?

Apparently . . .
and we have proof it does so safely

